



HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.]

FEBRUARY 15, 1904.

[No. 2.]

I s c h i a s.

(SCIATICA).

Sciatica is a neuralgic disease. It is of frequent occurrence and is often very distressing to the patient.

Its causes are generally involved in obscurity. Exposure to cold, excessive bodily exertion, acidity, dyspepsia and other abdominal affections are reckoned as some of the causes of this disorder. It is more frequent in men than in women and occurs at all ages, but more frequently from thirty to forty. Sickly persons are also frequently attacked than robust and healthy individuals.

The pain is the principal feature of the disease and it can be distinctly traced along the course of the nerve. Its location is generally on the posterior part of the limb from ischium to knee. It sometimes extends as far as the foot. Sciatica seldom affects both sides. Pains are often constant but remittent and do not leave the affected parts entirely. Darting, stitching, tearing and lancinating are the nature of the pain. It is aggravated by motion, exposure to cold, and pressure. The patient can not stretch the limb properly and in walking.

rests on the big toe leaning on one side. Many constitutional symptoms are developed from the intensity of the pain. The poor patient suffers from sleeplessness, disorders of the digestive tracts such as loss of appetite, constipation, and so forth.

Treatment—Homeopathic resources are abundant and effective in combating this disorder. We regret very much to say that many of our modern homeopathic works on Practice of Medicine speak very little of the curative treatment of this disorder. The authors of these works easily pose with some of the allopathic suggestions such as nerve stretching or cutting off the affected nerve and the like. We quote here what that veteran but plain speaking and renowned Dr. Baehr says in his work on the Science of Therapeutics.

"The treatment of this affection (sciatica) constitutes one of the shining features of Homeopathy, not so much because we cure every case of this kind as because our opponents admit that they have no means of doing anything for this disease and have to let the patient suffer for months; whereas we Homeopaths never fail of a cure in the course of a week or two at the latest. Yet even we ought not to boast of being absolutely certain of success, for the reason that this affection has but few symptoms, and not only a few of them are entirely local, hence the selection of the remedy is always invested with difficulties, and a successful result is often defective on this account. However, in order not to wrong Homeopathy, if no cure is effected, or is effected very slowly, we call attention to the fact that ischias sometimes depends upon causes that cannot be removed, such as exostoses, in the pelvic cavity."

We may also remark here that in those cases where there is paucity of developed symptoms, we ought to administer constitutional remedies or what we call in Hahnemannian

language the Antispasmodic remedies and the cure is more easily and more permanently effected.

There is an array of remedial list in our text books, but these sometimes mislead a beginner or confound a busy practitioner. We shall confine ourselves in giving the indications of some of the most prominent remedies of this disease. Of these Baehr mentions four, which are verified in many instances. They are, Colocynth, Rhustox, Arsenic and Lycopodium. The characteristic symptoms are given below.

Colocynth—"More particularly adapted to recent cases, pain sets in suddenly in all its fierceness, it is a constant pain, becoming intolerable only in paroxysms excited at once by cold and motion; at the same time a feeling of numbness, is experienced in the whole extremity."

Among other prominent symptoms we ought to mention, that Colocynth is applicable in Ischias on right side, pains are shooting and stitching-cutting, from hip to knee and tendency to shortening of limb. We are able to cure a great many cases by the help of this remedy alone.

Rhustox is very seldom adapted to quite recent cases, but comes into play in the further course of the disease, if the following symptoms are noticeable: stinging or burning tearing pain, increasing during rest and alleviated only for a short time by motion; heaviness, lameness and even actual paralysis of the affected limb. frequent paroxysms of cramps in the calves.

There are some constitutional symptoms present, such as fever with nocturnal aggravation, sleeplessness, constant restlessness and constipation.

In more recent cases of Rhustox type of ischias, Aconite is more efficacious than anything else. Hæppel says and many follow him in saying that in recent cases of sciatica Aconite is almost a specific. We cannot entirely endorse this view.

Baehr even does not mention Aconite as one of the efficacious remedies in this disease. When the nerve sheaths are affected by inflammatory irritation, with darting, burning and benumbing pain, in febrile action, rise of temperature and recent nature of the disease Aconite is the remedy *par excellence*.

Lycopod—in more chronic cases, pain is chiefly a burning or fine stinging pain, with complete intermissions, aggravated by rest and somewhat alleviated by motion, with lameness of extremity, disposition to painful muscular twitchings, especially if the bowels have become very much constipated in consequence of the distressing affection.

Arsenicum—Typical regularity of paroxysm, complete intermissions, aggravation at night, burning, tearing pain, which is seated close to the bone, increased by vigorous but alleviated by gentle movement, excited by cold but ameliorated by warm application to the part. The pain is unbearable, and characterised by an extreme restlessness and inability to remain in the same position.

These are sufficient for all practical purposes. As the disease is of a very distressing and painful kind, some other remedies are mentioned in this connection. Dr Baehr mentions them as follows:—

Chamomila—in recent cases, for a drawing, tearing pain which becomes intolerable at night and is especially aggravated by warmth of the bed.

Arnica—for a burning-tearing or stinging-tearing pain, with a numb and bruised feeling in the affected limb, with great sensitiveness to any kind of touch; for the ischias of lying-in females.

Pulsatilla—for a drawing pain which is more at night, compels the patient to move the diseased limb continually; the pain is much improved by movement and is somewhat

increased by warmth, not by cold ; the cause of the attack is menstrual suppression.

Carbo Vegetabilis—in protracted cases ; the symptoms are like those indicated for Arsenic.

Causticum—for ischiâs antica and for the paralysis caused by Sciatica.

Ferrum—pain is at first increased by motion but improved by the continuance of the motion, more particularly suitable for worn out individuals with extremely irritable nervous systems.

We may also mention Bryonia, Calc, Cimicifuga, Kalmia, Lachesis, Magnes Phos, Phytoacca, Spigelia, Stillingia and Sulphur.

Plague at Bankipore.

We have severe out-breaks of plague in our city and in the neighbourhood of this place for the last four years. Fortunately for us this year there is no sign of its presence visible up to this time.

In some of our Journals, we have noticed suggestions about its therapeutic assistance according to the homeopathic system of medicine. In my own personal experience I see very little efficacy of some of these medicines but in others I have some confidence. The truth is that in plague cases our attempts are not so successful as in most other diseases by homeopathic medication.

Of course it should not be taken as granted that we could do nothing in plague cases, on the contrary, the little success that attended the treatment of plague cases is mostly due to homeopathy ; allopathy and other systems of medicines are quite incapable of doing anything.

I have seen ordinary methods of selecting proper homeo-

pathic remedy for a given case, apply strictly in cases of plague also. I mean selecting medicines according to the totality of symptoms of the case. In this way I got best results from Bell, Rhus, Mercurius, Lachesis, Naja, Carb Veg, so forth, selected with proper indication. Our much-talked of Pyrogen and Ignatia seldom helped us much. Some of the cases of plague run on so rapid a course that nothing can be done in the way of treatment. In these kinds of cases I could not get the opportunity of seeing the case a second time.

About the general outbreak I must say from my own experience that densely populated and filthy parts of the town are most suitable places for plague invasion. Clean places and clean people suffer rarely and if a few patients are seen among these, the disease cannot hold its sway there. It can not hold an epidemic character. Frequent medication is not good in all cases. Prompt action of our remedies may be had even from a few doses. Sometimes we are required to repeat the doses very frequently. All potencies are applicable in my hand.

Pares Nath Chatterji, L. M. S.

A Cholera Case.

A young boy, about 12 years old, was attacked with cholera, while attending on another person who was a dp-labourer in the same mill, where this boy was an apprentice, and who was also attacked with the same malady. He had two or three loose motions while working in the mills, when he was frightened and thought it best to come home. On his way home, which was about a distance of three miles, he spoiled his clothes, but still persisted in walking the whole way. On arriving, at his house he had another very copious stool of rice water consistency after which he completely col-

lapsed and his extremities became perfectly cold and his countenance Hippocratic. A neighbouring homeopath was called who attended on him for three hours when he declared the case hopeless.

When I was called it was about 12 o'clock. The boy's condition looked to me to be quite what the other doctor had declared. He was very restless, tossing about the floor, he would keep nothing on his body although it was a cold winter day, his extremities were cold as ice, his eyes were slightly injected, his head was hot and he complained of a soreness all over the body. The previous history of a long walk in a weakened down constitution and the great exertion and fatigue consequent upon attending another sick person led me to give Rhus 30. In the evening I got the report that the patient was in the same state and he had another stool which was exactly of the same kind and complained of pain in the stomach and oppression of breathing. I gave Colchicum 30 three times that night. In the morning I got the report that the patient was no better. He had no more stool at night but the abdomen was very much distended and the oppression of breathing greater. The extremities were just as cold. I gave Carbo veg 30. About 10 o'clock I visited the patient when the patients' relatives had given up all hopes of his recovery.

I found the patient in a drowsy condition, he was very tympanitic and it was difficult to rouse him. He only screamed for water occasionally. On repeatedly asking him to show his tongue, he put it out with difficulty and I at once noticed Nash's dry tongue of Nux Moscata. Two doses of this remedy in the 30th potency brought about a complete change in the boy in the evening he passed water, the tympanitis became better and in two days' time the poor boy was completely cured.

J. N. Majumdar, M. D.

The Humiliating Confessions of Allopaths.

Bichat -- the illustrious physiologist, physician and author makes this humiliating confession -- "The *Materia Medica* is nought but a monstrous conglomeration of erroneous ideas; an incoherent assemblage of opinions that are themselves incoherent; it is perhaps of all physical sciences that which best illustrates the vagaries of the human mind. It is not a science fit for a methodic mind, it is a mishappen mass of observations; often puerile of illusory methods of formulas that are as grotesquely conceived as they are arbitrarily combined. Medical practice is said to be contradictory, I say more -- it is not in any respect a profession worthy to be followed by sensible men".

Sir Andrew Clark -- in his address on Medicine at the British Medical Association delivered himself as follows: -- "When but a little time ago Sir William Hamilton asked quite seriously if the practice of medicine had made a single step in advance since the time of Hippocrates; when we hear that the leaders of medicine, both here and abroad are sceptical of the curative influence of drugs upon disease; and when we know the experienced practitioners are divided in opinion as to the effects upon the body of the commonest medicines; we cannot doubt that this, the light department of our art, and one of its chief ends, is in a backward and unsatisfactory condition."

Dr. Headland -- who wrote a highly-praised work on the *Action of Medicines* says: -- "It must be confessed that in the understanding of the action of medicines, and of their agency in the cure of diseases, we do not so much excel our ancestors. While other sciences are moving, and other enquiries progressing fast, this subject, so momentous in its

application, has in spite of the earnest labours of few talented investigators, made, after all, but small progress."

F. Hoffmann—the most celebrated physician of the last century, writes:—"As regards most medicines the physician is deceived as their true properties are quite unknown, and we know of no general law of nature for their remedial employment in disease".

Dr. Oliver Wendell Holmes—author of the *Autocrat of the Breakfast Table*, writes:—"If all drugs were cast into the sea, it would be so much the better for men, and so much the worse for the fish".

Hufeland—the Nestor of German medicine, wrote—"My opinion is that more harm than good is done by physicians, and I am convinced that had I left my patients to nature instead of prescribing drugs, more would have been saved."

Dr. Inman—a well-known medical author, writes:—"There is scarcely one physician of cultivated intellect and tenacious memory who could not write an interesting, nay, even a fascinating book, respecting popular medical errors and the fallacies of the faculty, but all forbear, under the feeling that it is an ill bird, which fouls its own nest. I have been for fourteen years a hospital physician, and I declare there has not been in all that time any one thing which I have seen do so much good to my patients as the warm comfortable beds they were ordered to lie on".

Dr. James Johnson founder and editor of the *Medico-Chirurgical Review*, wrote:—"I declare it to be my conscientious opinion, founded upon long observation and reflection, that if there were not a single physician, surgeon, apothecary, man midwife, chemist, druggist, or drug in the world, there would be less sickness and less mortality than there is now. Much of the uncertainty, obscurity and difficulty which is encountered, has arisen and continues to flow from the irrational manner in which medicine has been taught and studied."

Dr. Johnson—of King's College, thus deprives of his own art of all claim to be considered a 'healing' art :—"The most general and comprehensive statement with regard to the cure of diseases that can safely and confidently be made is this—most of those diseases that are curable by any means are curable by the unaided powers of nature", *ergo* doctors of his school are of no use whatever.

Professor Toerg—who made a considerable number of provings of medicines, expresses his astonishment at the variety of opinions expressed by different writers on *Materia Medica* and says : "that as far as my own experiments have gone, I have hardly found one medicine whose true properties were known to those writers."

Kieser—a highly esteemed authority in medicines, wrote :—"In many cases the old saying holds good—that the remedy is worse than the disease, and the doctor does more mischief than the malady".

Dr. W. Ö. Markham—in his address on medicine in 1862, said :—"It may be cruel and humiliating to the pride of medicine to acknowledge that from the days of Hippocrates to our own, it has put faith in and practised the most grievous error."

Collected by Dr. R. Banerjea.

Clinical Notes.

Case 1. *Osimum* in headache—A young and robust lady aet about 28 years, mother of three children, came under my care on the 28th. Dec. 1902 for a very troublesome headache. Her menstrual discharge was copious and painful ever since the first appearance of it. I treated her and she got well.

After the birth of the first child about ten years ago, she complained of great weakness and heaviness of the head.

This went on for sometime, and some tonics or stimulant medicines from an allopathic doctor apparently cured her of it.

Five years after she had a second child born when she got intense headache. This also had been treated by an allopath and the suffering was mitigated, but the headache did not leave her altogether. Her health became rather broken down and a periodical headache was the result.

Her husband came down to Calcutta and after consulting me about her case took some medicine, but I forgot the name of the medicine. This time I requested him to bring her here. On examination I found nothing organically wrong with her. Headache came on with great violence generally in the afternoon, and during the climax of her suffering, sight became dim and hazy; generally the right side of the head was affected. Pain was better by pressing hard on the head and by cold applications such as cold water, Lavender water, rose water and the like, but she was afraid to apply them as they had a tendency to bring on catarrh and cough. This headache made her irritable and quarrelsome. Then the headache was not intense, she complained of heaviness of the head and mental uneasiness. Menses regular but still very copious. Tendency to vomiting during the height of the paroxysm of headache.

I gave a few doses of Sanguinaria 3x morning and evening. After four days, I learned that it had no effect. I ordered her to take a few doses of Osmium 12x every evening during the aggravation of headache. It had the desired effect, the suffering was at once removed and she wanted more of those powders. I gave her some placebo powders. She made a complete recovery, as I got the information from her husband in December last.

Case 2. Babu Hari Das Choudhuri, 25 years old robust and otherwise healthy, got headache on the 29th August 1903. He was addicted to masturbation and has been victim to semi-

nal debility, and had frequent nocturnal pollution. Headache came on suddenly and he was very bad with it. I was consulted three days after when he was in great agony. In the morning he was little better but as evening approached, he became mad with pain. Whole head was affected but it was more on the right side.

Pain extended from the top of the head to the eyes, was of a digging and piercing nature as he described it. Sight became dim and eyes slightly red. Belladonna low and high was tried by another homeopathic physician for two days to no purpose.

I gave him six powders of Osmium 6x morning and evening. He came out to thank me for his relief and wanted some more of those powders. He got some placebo powders and reported from time to time that he was free from pain. He said it is a strange thing that along with the headache his nervous debility disappeared also. He had no pollution for one month and he was gaining health.

Case 3. *Pæonia in Fistula in ano*—Babu—Ray Choudhari about 32 years of age, tall, fair and healthy looking young man, had bleeding piles for a long time. He applied some medicine given by a quack and that stopped the hæmorrhage but soon after followed by intense pains in the parts.

Gradually swelling took place and suffering was intolerable. He consulted some allopathic doctor, who poulticed the parts and wanted to operate when ripe. He came under my treatment on the 6th January, 1898. There were bunches of external piles, some of them were fissured, and from the bottom of the swelling pus came out rather slowly. I gave *Merc Sol 30* one dose three times a day. Two days after he reported less suffering and pus coming out in abundance.

I examined the parts and found a fistulous opening about half inch in length. There was pain immediately after defecation and that continued to trouble him for a few hours

Bowels were rather constipated, hard balls of small size came out after great exertion.

Graphites 30 twice daily for three days. No more improvement than that the stools were thin and many in the day, but none at night.

Patient complained that passing of even soft stools gave him more pain than formerly. He had dyspeptic symptoms also. Pus came out occasionally. Lycopod 200, one dose, followed by placebo.

No improvement in four days. I gave him Pœonia Off 3x three times a day. This had the desired effect in two days. Pain almost subsided, swelling reduced to its natural size and pus decreased.

I continued the same twice daily now. The piles had been reduced in size and some of them disappeared altogether. Medicine was stopped and he complained slightly again. Pœonia 30 one dose every morning. Under this remedy he said the improvement was steady and he made a perfect recovery in three months.

Case 4. *Medorrhinum* in *Diabetes*—A robust young man of 29 years of age, had an attack of syphilis and gonorrhea about three years ago, and had been treated by allopathic doctors. He got cured. He was working hard for his business and noticed an increase of urine and good deal of languor. He consulted allopathic doctors, who after examining his urine, declared his case to be a confirmed case of Diabetes.

Specific gravity was 1035 and sugar about .35 grains per ounce. He was treated with various allopathic medicines with strict diet which consisted of meat and brown bread, no rice or sugar of any kind being allowed.

He came under my treatment two years ago, much reduced in health, with much more sugar in urine, evening fever, good deal of thirst, appetite great but getting emaciated. Burning of the body and habitual constipation. I treated him

for a month with Arsenic 30 and Phosphoric Acid 6 and Uran nitric 3x, without any benefit. He said one day that he found some cracks in the prepuce and that gave him great amount of suffering. Vaseline was applied with the remedies above mentioned.

At last I gave him a dose of Medorrhinum 200 followed by a few doses of placebo for one week. The next week he remarked that his condition has undergone a thorough change for the better. His urine less, strength gained, thirst and appetite less and no languor after his usual daily work.

He wanted some more powders and I gave one more dose of Medorrhinum and placebos for two weeks. Since taking these his improvement was steady and lasting. I wished his urine to be tested again and he did so by his former analyser who declared him to be free from diabetes.

I allowed him no more medicine and he was perfectly recovered. I did not restrict his diet much, rice, curry, dal, milk ghee, luchi were all plentifully allowed, sugar of course was given in small quantity, various kinds of sweetmeats, taken by our people were stopped. He is enjoying perfect health now and is working hard in his business like any other youngman of his age.

P. C. Majumdar. M. D.

Case, 1. Cholera cured by Veratrum—H. P. 48. General health good; attacked since 5-30 A. M. I was called to see her at 8-30 A. M. In these 3 hours she had 6 stools and vomited twice. Stools loose and watery; while sitting there she had, one stool which left flocculent deposits. *Veratrum Album* 3x was given to be taken one drop after each stool. The patient also had nausea but not much thirst: general abdominal tenderness, specially over the stomach: cutting colic during stool, pulse softer, urine suppressed.

Dr. Salzer came at 9:30 A. M. He put a few drops of Verat 3x in a few ounces of water and directed the patient to have a sip after each stool: a few globules of Verat 30 was also put into a jug of water and the patient to drink that water only whenever thirsty. Between 8-30 A. M. when I saw her first and 10-30 A. M. she had 3 more stools—altogether 9 stools and 3 vomitings. The 7th and 8th stools which were kept for our know, were each about 10 to 12 ounces; they contained chur fluid above and flocculent deposits below feebly alkaline.

Since then she had no more stools or vomitings, except one at 10-30 P. M. which was not choleric; nausea, thirst and other symptoms all went away gradually. At 9 30 A. M. temp. was 99. 2°, 12 A.M. 100°, 6 P.M. 100°. She slept all night and passed urine during the night. Next day she was given sago.

Case 2. *Cholera cured by Ricinus.* 27-7-88—H. M. 25. Has been vomiting and purging since 4 P. M. I was called to see him at 10 P. M. He seems to have had taken some *Hilsa fish*, more than he could digest. He vomitted thrice and purged 8 times the last vomited water consisting of undigested food. He purged first natural, then began to pass watery stools. There was much griping pain now and then in the abdomen.

He was given Ipecac, Nux, Puls before I saw. His symptoms on inspection appeared to be—eyes a little sunken, countenance slightly anxious, pulse very small and quick; features slightly sunk, much thirst for large quantities of water, no internal restlessness or burning, body warmer, no stool since an hour and no griping pains also since that time. Ricinus 6 was prescribed after each stool and one dose was given at once.

28-7-88—Had one stool after I left and another at 4 P. M. both the stools are much less in quantity, specially the last

one ; pulse had improved, feels hungry. The same medicine was continued and sago was given for diet.

The patient was asked particularly about urine at night, but he confessed that he passed urine, each time he passed stool. The state of the pulse led me to suspect it to be a case of *cholera* rather than intestinal catarrh.

Case 3. Cholera. 13 8-99 ° H. M. 20. was attacked since morning with vomiting and purging. I saw him at 12 A. M., pulse weak and inter mittent, body still warm. Purged and vomitted several times : Stools watery with flocculent deposits below : slight cramps in legs, thirsty. *Verat* 6 was given after each stool.

7 P. M.—Hardly 2 stool, no vomiting, cramps increased with restlessness and with great burning of the skin. Cup. Ars 6 every 1½ hour.

9 P. M.—Had 3 stools for which he was given *Verat* each time, the other medicine continued as before, hardly any cramps now, but great restlessness and burning of the skin—pulse stronger. Ars 30 every hour, was given.

14-8-99 No burning of the skin or cramps, pulse weaker had one copious stool and copious vomiting at 10 P. M., and after that several scanty stools, body became quite collapsed from which he has much recovered now, feels hungry. Medicine stopped and sago was given.

2 P. M.—Had 4 stools, pulse weak, stool watery and fecal, tongue covered with a yellow fur; complains still of restlessness and burning of the skin ; each stool is preceded by griping which is relieved by the evacuation, great thirst. *Nux vom* 6 after each stool and Ars. 3x was given.

6 P. M.—Had 3 stools pulse slightly better. *Nux* 200.

15 8-99—Had 8 stools all watery and yellowish, the first one copious, the subsequent scanty and the last 2 greenish, a little mucous with the last few stools, pulse much stronger and fuller, body warmer. *Nux vom* 200 one dose, omit rest.

2. p. m.—Had one stool at noon after which a dose of Nuxvom 200 was given.

16 8-99—Had 4 stools since seen last, pulse very good, skin warm, advised to go home.

Remark—Perhaps *Podophyllum* if given from the beginning would have cured the patient sooner.

B. B. Maitra, M. B

Editorial Notes.

Health of our city is unusually salubrious now. No particular disease is noticeable. Plague cases are few and far between. A few sporadic cases of cholera and slight cold and catarrh can be seen. The cold weather is preternaturally prolonged and severe this year and that seems to be the reason for the healthy state of our city.

We are glad to see that our English colleagues in London and other parts of great Britain are trying their best for better study and appreciation of Homeopathy in their land. They inaugurated the British Homeopathic Association and under the auspices of that body they open out courses of lectures and other works of utility. We enumerate them here.—

1. Professional lectures, (a) Materia Medica, and (b) Therapeutics.

2. Tutorial works.

3. Special "Wednesday" Lectures, dealing with particular topics or problems in the science and art of Homeopathy.

4. Missionary course. For foreign missionary students and missionaries.

5. Prize Essay.

Subject:—On the best means for the organisation and

development of Homeopathic Professional Education in Great Britain."

6. The Proving of drugs.
7. Original Research.
8. Works issued by the Association.

We expect a great thing from these objects on the points of education as it is for the glorification of the art and science of Homeopathy.

We have long thought that malaria is also a latent outburst of Psora. In a village where malaria abounds every year, almost every one has been attacked with it, and the suffering in some cases is very great, but the village is peculiarly free from malaria this year.

The Krishna Jiban Charitable Dispensary, of Chapra in the district of Nuddea, is an institution from which the poor people of the place as also of many of the neighbouring villages receive medical aid. We had much pleasure in visiting this dispensary. Babu Sham Lal Majumdar, the attending physician is a very experienced man and an enthusiastic worker in the cause of Homeopathy.

Messrs Lahiry and Co. the well-known Homeopathic Chemists of this place has promised a silver medal every year to the Student who stands first in the Examination on Pharmacy in the Calcutta School of Homeopathy.

There is a good opening in many of the small towns of Bengal for a thorough going Homeopath. In our recent visit to some of these places we found that the people appreciate Homeopathy. But the lack of a good man often compels them to have resort to allopathic treatment even against their will.

Dr. Pares Nath Chatterjee L. M. S. of Bankipur, Dr. Mahendra Nath Ganguly L. M. S. of Cawnpur and Dr. Jagat Chandra Ray L. M. S. of Pabna have done much for the cause of Homeopathy in these quarters.

Dr. Dayal Chandra Ghosh L. M. S. and Dr. Gopal Chandra Goswami M. B. are two veteran Homeopaths who have done much to spread Homeopathy in the Hughly district, the one from Chandernagore and the other from Serampore.

The late Dr. Annada Prasad Mukerji L. M. S., who had the most extensive practice in Burdwan, was a champion of the cause of Homeopathy. It was through him that Homeopathy at times found a place in the Burdwan Raj family, but we regret to find that since his death nobody has been there to take his place.

Of late Homeopathy seems to be gaining ground among the English people. We rejoice to find that our English confrères are making steady progress almost by leaps and bounds. A new dispensary and a new hospital is being opened frequently. Even here in Calcutta Homeopathy seems to have made a marked progress among the European and Eurasian community in recent times. This is a good sign indeed.

Repertory of Mind.

By Dr. B. B. Chatterjee of Benares

Continued from Page 190 Vol. XII.

MIND.—A.

A sort of wild wandering feeling; Cannot confine his mind; Baptisia;

A speech ; In the middle of— ; The most familiar words fail him ; Forgetful ; Baryta C.

A spirit ; Imagines he is hovering in the air like — ; When walking in the open air ; Asarum C.

A spiteful malicious disposition ; Careful zealous persons, inclined to get excited and angry or of— ; Nux Vom ;

A strange person was at his side ; As if—, as if soul and body were separate ; as if made of glass ; as if a living animal were in abdomen ; fixed ideas ; Thuja ;

A strange place ; feels as if he was in— ; Causes fear ; Cicuta viro ;

A subject several times ; Must read — ; or add a column of figures over and over before correct ; Inability to concentrate mental effort ; Ailantus glan.

A thunder storm ; During— ; At twilight ; When alone ; about the future ; * Anxious, restless ; with palpitation ; Phos ;

A trifle ; Became excited over ; Lachnan Tinct ;

A trifle will disturb ; Very irritable ; Drosera ;

A walk in the open air ; After— ; Indisposed to think ; Arnica mon ;

A word ; she does not speak— ; Declines answering question, dislikes sympathy ; Arnica mon ;

A word ; Unwilling to speak—, or to answer ; Taciturn ; Cactus grandi ;

Abated ; Uterine irritation— ; Disposed to curse, to strike, to think of obscene things, as these mental states came ; Lilium Tig ;

Abdomen ; As if a living animal were in— : Fixed ideas ; as if a strange person was at his side , as if soul and body were separated ; as if made of glass ; Thuja ;

Abdominal complaints ; With— ; Extreme irritability of temper ; Acetic-ac.

To be Continued.

ইণ্ডিয়ান হোমিওপ্যাথিক রিভিউ ।

১৩শ ভাগ ।

১৫ই ফেব্রুয়ারী ১৯০৪ ।

{ ২য় সংখ্যা ।

চিকিৎসা কার্য ।

• মহাত্মা হানিমান হোমিওপ্যাথিক চিকিৎসার কর্তা, তাহা আমরা সকলেই জানি, কিন্তু তিনি যে সমুদায় উপদেশ দিয়া গিয়াছেন তাহা আমরা অনেক জানি না এবং জানিবার চেষ্টাও করি না ।

তিনি বলিয়াছেন চিকিৎসা কার্য অতি ভয়ানক দায়িত্বপূর্ণ কার্য । মনুষ্যের জীবন রক্ষা করা এই কার্যের উদ্দেশ্য । এই গুরুতর কার্য সম্পাদন করিতে যে সমুদায় বিষয় শিক্ষা ও আগ্রহ করা কর্তব্য তাহা অতীত যত্নের সহিত সম্পাদন করিতে হইবে । তাহা না করিলে বা সে বিষয়ে উদাস্ত ও আলস্য প্রদর্শন করিলে মহা পাপ কার্য করা হয়, অতএব জীবন রক্ষা করণার্থ যাহা যাহা আবশ্যক চিকিৎসক সর্বপ্রথমে তাহা শিক্ষা করিবেন এবং যত্নের সহিত প্রতিপালন করিবেন ।

তিনি বলিয়াছেন প্রথমে রোগীর যাহা আরাম করিতে হইবে তাহা অবধারণ করা, অর্থাৎ রোগ নিরূপণ করা আবশ্যক । পরে যে উপায়ে সেই রোগ নিবারণ করা যায় তাহার বিষয়ে জ্ঞাত থাকা, অর্থাৎ ঔষধের রোগ নিবারক ক্ষমতা স্থির করা উচিত । পরে যে উপায়ে সেই ঔষধ প্রয়োগ করিতে হইবে তাহার বিষয় অবগত থাকা চিকিৎসকের কর্তব্য কর্ম, অর্থাৎ ঔষধের মাত্রা ও কত বাঁধ ঔষধ প্রয়োগ করিতে হইবে তাহাও অবধারণ করিতে হইবে । •

এই সকল বিষয় চিকিৎসক যখন অধিকার করিতে পারিবেন তখনই তাহার চিকিৎসা কার্য সার্থক হইবে । নতুবা কেবল চতুর্দিক হাতড়াইয়া বেড়াইতে হইবে । • অক্ষ যেমন কিছু দেখিতে পায় না সেইরূপ অক্ষ চিকিৎসক হইতে হইবে এবং ইহাকেই প্রকৃত পক্ষে হাতুড়িয়া চিকিৎসক বলা হইয়া থাকে । কেবল অথবা হাতড়াইয়া বেড়ান বলিয়াই তাহাকে হাতুড়িয়া বলা হয় ।

ঔষধ যে কিরূপে প্রস্তুত করিতে হয় তাহার জ্ঞান থাকাও নিতান্ত আবশ্যক, আমাদের দেশের চিকিৎসকেরা পূর্বকালে এ বিষয়ে বড়ই নৈপুণ্য প্রদর্শন করিতেন, এক্ষণে তাহার বড়ই অমনোযোগ হইয়াছে। ইহা কেবল আমাদের জ্ঞানস্তর পরিচয় প্রদান করিতেছে। এদেশে হোমিওপ্যাথিক ঔষধ সমুদায় বিলাত, আমেরিকা প্রভৃতি পার্শ্বাভ্যন্তর দেশ হইতে আমদানি হইয়া থাকে, সুতরাং এ বিষয়ে মনোযোগ করা আমরা উপযুক্ত মনে করি না। ইহা বড়ই অস্বাভাবিক কার্য্য বলিতে হইবে। ঔষধ প্রস্তুত সহজে করিতে না হইলেও প্রস্তুত বিষয়ে জ্ঞান থাকা উচিত। কেবল প্রস্তুত বলিয়া নহে ঔষধের তত্ত্ব অবগত হওয়াও উচিত।

ধাতব দ্রব্য হইলে কোন ধাতু হইতে কিরূপে ঔষধ প্রস্তুত হয় তাহা শিক্ষা করা উচিত, ধাতুটা না চিনিলে চলে না। এইরূপে উদ্ভিদ বস্তু হইতে যে সমুদায় ঔষধ প্রস্তুত হয় তাহার বৃক্ষ লতাাদির পরিচয় না জানিলে অনেক সময়ে প্রতারিত হইতে হয়। 'এই সমুদায় বিষয় প্রকৃত জ্ঞান থাকিলেই যথার্থ চিকিৎসা হওয়া যায়। তাহা হইলেই প্রকৃতরূপে চিকিৎসা কার্য্য সম্পাদন করিয়া মনুষ্যের জীবন রক্ষা ও সুখ, স্বচ্ছন্দতা বৃদ্ধি করিতে পারা যায়।

অস্ত্র চিকিৎসা দ্বারাও চিকিৎসা কার্য্য সম্পাদিত হয়, কেবল ঔষধ প্রয়োগ দ্বারা যখন রোগের উপশম না পাওয়া যায়, অথবা যেখানে রোগের ধর্ম্ম দেখিয়াই বিবেচনা হয় যে অস্ত্রের সাহায্য আবশ্যক, তথায় সে সাহায্য গ্রহণ করাও অস্ত্র্য নহে। এ বিষয়ে কিন্তু আশ্চর্য্য অনিরূপ দেখিতে পাওয়া যায়। অনেকে ঔষধ প্রয়োগ না করিয়াই একেবারে সিদ্ধান্ত করিয়া থাকেন যে এ রোগে অস্ত্র ভিন্ন উপায় নাই। এটা একটা বিষম ভ্রম, আমরা অনেক সময় দেখিতে পাই যে সে স্থানে অস্ত্র প্রয়োগ না করিয়া ঔষধ প্রদান পূর্বক রোগ নিরাময় করা যায়, তথায় অথবা অস্ত্র চিকিৎসার সাহায্য লওয়া হইয়াছে। নিরর্থক রোগীকে কষ্ট দেওয়া হইয়াছে, এমন কি ইহাতে অনেক সময় আরোগ্য কার্য্য সাধিত হয় নাই বরং অপকার হইয়াছে। ইহাকে প্রকৃত চিকিৎসা কার্য্য বলিতে পারি না। এ বিষয়ে এলোপ্যাথিক চিকিৎসকেরাই বিশেষভাবে দোষী। সাধারণতঃ একেবারেই অস্ত্র ব্যবহারের উপদেশ দেন এবং উহাতে কাহারও আপত্ত্য হইলে তাহাকে বাতুলের মধ্যে গণ্য করিয়া থাকেন, কিন্তু আশ্চর্য্যের বিষয় এই

যে সেই সমস্ত রোগী অঙ্গের সাহায্য ব্যতীত যখন ঔষধে আরোগ্যলাভ করে তখন তাঁহারা ই অব্যবহার লোকের নিকটে বাতুল নাম প্রাপ্ত হইয়া থাকেন। ইহা আমরা অনেক প্রত্যক্ষ করিয়াছি।

যেখানে প্রকৃত প্রস্তাবে অঙ্গের সাহায্য আবশ্যক তথায় উহা সর্বপ্রযত্নে গ্রহণ করা উচিত। এই জন্তই চিকিৎসা কার্য উত্তমরূপে সম্পাদন করিতে গেলে অঙ্গ চিকিৎসার জ্ঞান ও লাভ করা অতীব কর্তব্য।

চিকিৎসকের আর একটি গুরুতর দায়িত্ব আছে তাহাও তাঁহাকে শিক্ষা করিতে হইবে। সেটা স্বাস্থ্যরক্ষা। চিকিৎসক যে কেবল ঔষধ প্রদান করিয়াই চিকিৎসা কার্য করিবেন তাহা নহে। তাঁহাকে যত্ন-পূর্বক শিক্ষা করিতে হইবে, কিসে মনুষ্য শরীরে রোগ প্রবেশ করে অর্থাৎ কি কি কারণে রোগ উৎপন্ন হইয়া থাকে। এ জ্ঞান হইলেই তিনি বুঝিতে পারিবেন যে এই সমস্ত কারণ পরিত্যাগ করিতে পারিলেই রোগের আক্রমণ হইতে পারেন না। অতএব তিনি সমস্ত লোককেই এ বিষয় শিক্ষা দিবেন।

রোগ প্রকাশের এই সমুদায় কারণ অব্যবহার ছই শ্রেণীতে বিভক্ত। অর্থাৎ কতকগুলি রোগ প্রকাশের পূর্ববর্তী কারণ, আর কতকগুলি তাহার উদ্দীপক কারণ বলিয়া গণ্য। এই সমুদায় দৈর্ঘ্যে গেলেই রোগীর ভূত ও বর্তমান অস্বাস্থ্য বিষয় অবগত হইতে হয়। রোগীর শরীর পূর্বে কিরূপ ছিল, এমন কি তাহার পিতামাতা বা তৎপূর্ববর্তী স্বজনের শারীরিক ও মানসিক অবস্থা কিরূপ ছিল তাহা অবধারণ করিতে হয়। ইহা না করিতে পারিলে পুরাতন পীড়ার চিকিৎসা কার্য তো একেবারেই সম্পন্ন করা যায় না। আর কতকগুলি কারণ নূতন প্রকাশ পাইয়া রোগ উপস্থিত করে, ইহাদিগকেই উদ্দীপক কারণ বলা যায়।

চিকিৎসক যদি এই কারণ সমুদায় অবধারণ ও স্থির করিতে না পারেন তবে তাহার চিকিৎসা কার্য সম্পাদন করা অসম্ভব হইয়া উঠে। অতএব চিকিৎসকে এ সমুদায়ই যত্নপূর্বক শিক্ষা করিতে হইবে।

কামোন্মাদ বা নিম্ফোম্যানিয়া ।

অতিরিক্ত কাম চরিতার্থতার ইচ্ছাকেই কামোন্মাদ বলে। ইচ্ছা অনি-
বার্য ও নিছুমাত্র লজ্জা না থাকে ; পুরুষ দেখিলেই স্ত্রীলোক তাহার সহিত
সঙ্গের জন্য অনুরোধ করেন ।

হস্ত মৈথুন, অসম্পূর্ণ কাম চরিতার্থতা, কামোদ্দীপক গ্রন্থপাঠ, পুরুষের হস্ত-
স্পর্শ প্রভৃতি কারণে এই পাড়ার উদ্ভেদক ।

পীড়ার প্রথম অবস্থায় স্ত্রীলোক লোক সঙ্গে অতিশয় লজ্জা প্রকাশ ; পুরু-
ষের সহিত সাক্ষাৎ হইলেই, স্ত্রীলোকের চক্ষুর চাক্চিক্য হয়। প্রেম বিষয়
কেবল আলাপ করিতে ইচ্ছা করে এবং শেষে ভাবভঙ্গীতে ও কথাবার্তায় মনের
ভাব ব্যক্ত করে। পীড়ার আর একটু বৃদ্ধি হইলেই লজ্জা এককালীন দূরী-
ভূত হয় এবং পুরুষ দেখিলেই তিনি তাহার উপযাচক হইয়েন। স্মৃতি শক্তির
ও বুদ্ধির হ্রাস হয়। শেষে রোগিনী সম্পূর্ণ উন্মত্তা এবং তাহাকে আবদ্ধ
করিয়া রাখায় আবশ্যকতা হয় ।

প্রথমাবস্থায় এ পীড়া সহজে লাঘব, কিন্তু শেষাবস্থায় অতি কষ্টে লাঘব হয়।

ক্যানাবিস্ সেটাইভা—বক্ষ্যাত্ত সত্ত্বেন ব্যত্যস্ত কামোত্তেজনা। মধ্য রাত্রির
পর লক্ষণ সমূহের বৃদ্ধি এবং পূর্ণাঙ্ক তাহার বিশেষ বৃদ্ধি।

কাহারিস্—যোনির মধ্যে অত্যন্ত চুল, কান ও প্রবল কামেচ্ছা। ঘন ঘন
মূত্রত্যাগ ও তাহাতে অত্যন্ত জ্বালা ও যন্ত্রণা হওয়া।

ডিজিটেলিস—দিবারাত্রি কামেচ্ছা, নাড়ীর মন্দগতি ; মলে হলদে বর্ণের
অভাব।

হারসিয়ামস্—মানসিক উত্তেজনা না হইয়া শারীরিক কামোত্তেজনা।
কামোন্মাদ ও লজ্জাবিহীনতা। উলঙ্গ হইতে চেষ্টা। শরীর কম্পন ও থেঁচনি।
অতিরিক্ত হাস্য।

প্লাটিনম্—অতিরিক্ত রতিপ্রবৃত্তি বিশেষতঃ যুবতীকুমারীদিগের। উদর
ও যোনিবারের স্ফুট স্ফুটানি। মল নিঃসৃত হইয়া মলদ্বারে কাদার আয় লাগিয়া
থাকে। গুল্মবারবিক কাস।

ডিগেটম্ আৰম্—বিশেষতঃ গর্ভিণীদিগের কামোন্মাদ। কাম প্রকৃতি

ও কামোদ্দীপক আলাপ। তৃষ্ণা ও শীতল জলপানের আকাঙ্ক্ষা। রক্তপ্রাধিকার পূর্বে বা কালে বমন ও উদরীয়ময় অথবা শুষ্কমাত্র উদরায়ময়।

আত্মসঙ্গিক—উপশ্রাস প্রভৃতির পাঠ এককালীন নিবেদন; রোগিণীকে সর্বদা শারীরিক পরিব্রজে নিযুক্ত রাখা; ধর্ম ও জ্ঞান সম্বন্ধে পুস্তক পাঠ বা আলাপ করা। পুরাতন পীড়ার বৎসরাবধি চিকিৎসার প্রয়োজন হয়।

স্মৃতিকোন্মাদ বা পিওরপ্যারেল ইনস্ট্যান্টি।

ইহা দুই শ্রেণীভুক্ত। (১) তরুণ উন্মাদ; ইহা প্রসবের পরই দৃষ্ট হয়। (২) পুরাতন বা বিষাদোন্মাদ, ইহা শিশুকে স্তনপান কালীন দৃষ্ট হয়।

(১) প্রথম শ্রেণীর পীড়া পারাময় দৃষ্ট হয়। ইহা প্রসবকালীন, অস্বা-
বিত পরে বা ২৪ সপ্তাহ পরে দৃষ্ট হয়। প্রসূতি বেদনার যন্ত্রণা চীৎকার
করিতে আরম্ভ করেন ও একবারে উন্মত্তা করেন; একপ স্থলে অর ও প্রলাপ
হয়। সাধারণতঃ এ পীড়ার উদ্ভূতির পূর্বে রাত্রিতে অনিদ্রা হইতে আরম্ভ
হয়; অনেক সময়ে সম্পূর্ণ অনিদ্রাহেতু মানসিক অসম্মতা হয় ও তাহাতে
পীড়ার বৃদ্ধি হয়। প্রতিমূর্তির চাক্চিক্য, শিরঃপীড়ার ও চক্ষুর বিপর্যয়
জ্যোতিঃ ও বিকৃত দৃষ্টি দৃষ্ট হয়। স্বভাব কক্ষ হয়, দুগ্ধ ক্ষয়নের প্রথমে
হাস পরে লোপ হয় এবং স্বতন্ত্রশক্তির হ্রাস হয়। বাচালতা হয়, কিন্তু মানসিক
ভাবসমূহ পরিবর্তন হইলেও পরস্পর অসংলগ্ন; মনে কোন এংষ্টা ভাবের
জাগরকতা দৃষ্ট হয় এবং সেই ভাব প্রায়ই কাম প্রবৃত্তি সম্বন্ধীয়। কখন বিবাদ,
কখন বা মানসিক উত্তেজনা ও উন্মাদ; গাত্রবস্ত্র ছিন্ন করা, আপনাকে বা
অন্যকে হত্যা করিবার চেষ্টা, অন্তকে প্রহার করা বা কামড়ান, শরীরের ভাব-
ভঙ্গীতে কামোন্মাদ দেখান। স্বামী, সন্তান বা অন্ত আত্মীয়জনকে এককালে
বেধিতে না পারা ও সুবিধা পাইলে তাহাদিগকে হত্যা করা।

তরুণ পীড়া বহুদিবস থাকিলে অতরুণভাব ধারণ করে; অনেক সময়ে এই
অতরুণ পীড়া প্রথম হইতে উদ্ভূত হয় এবং তখন ইহা প্রথমে শনৈঃ শনৈঃ
অঙ্গদিশা পড়ে। প্রথমে মানসিক অবসাদ, নিদ্রাশূন্যতা, অপরিপাক, শিরঃ-

পীড়া ও শারীরিক অস্থিরের অন্ত্যন্ত লক্ষণ ক্রমশঃ দৃষ্ট হইয়া পীড়ার উদ্ভূতি হয়। এই প্রকারের পীড়া আরাম করা অতি কঠিন।

(২) স্নাতকপীড়া ; ইহার সহিত পূর্ববর্ণিত অতৃষ্ণ প্রকারের প্রভেদ এই যে ইহা সহজে সাধা ইহা কয়েকদিন মাত্র স্থায়ী, বিশেষতঃ যে সকল পীড়া স্মৃতিকোষাদেবের পর উদ্ভূত হয়। অধিকাংশ স্থলে উন্মাদ তিন সপ্তাহ মধ্যে আসিয়া যায়, অনেক সময়ে তাহার পূর্বেও ; ইহার আংশিক উন্মাদমাত্র থাকে, অথবা নিদ্রার অন্তিম সময়ে নিয়ত ভ্রম থাকে। এই গুলি ক্রমশঃ সারিয়া গিয়া, প্রস্থতির মানসিক অবস্থা স্বপ্ন হইতে জাগরিত ব্যক্তির স্থায় ; এই অবস্থা হইতে আরোগ্যের আশা করা যাইতে পারে। কোন কোন স্থলে ২৩ মাস যাবৎ পীড়া থাকে ; ৬ মাস থাকিলে আরোগ্য হইবার আশা অতি অল্প। মৃত্যু হইলে ফুস্ফুস প্রদাহ, মস্তিষ্ক প্রদাহ পড়তি আনুষঙ্গিক কোন পীড়া হইতে হয়।

এ পীড়ার কারণ—মানসিক উদ্বেগ, ভয়, বিলম্বিত প্রসব ক্রিয়া এবং কাহার কাহারও মতে প্রস্থতির রক্তের দূষিত অবস্থা।

চিকিৎসা—উন্মাদের চিকিৎসা। স্নেহ ও ভালবাসা দেখাইয়া থাওয়ান ও ঔষধ সেবন করাইতে হইবে ; উভয়ই বর্জিত ; কারণ, প্রস্থতি উভয়েতেই অস্বীকৃত। বায়ু সঞ্চারিত গৃহে রোগিনীকে রাখিতে হইবে।

সাধারণতঃ একনাইট অরম, হারসি, ট্র্যামো, পলসে, ভিরে-আ ও সধাকরের প্রয়োজন হইবে।

একনাইট—অত্যন্ত ভয়, মৃত্যু ভয়, অপরিচিতের ভয়, উঠিয়া বসিতে ভয়, যেন ভয়হেতু পীড়ার উদ্ভূতি।

অরম—অত্যন্ত অস্থির, আত্মহত্যার নিমিত্ত ইচ্ছা ; স্থিতি ও বুদ্ধির হ্রাস, দিবাশ্রাদ্ধি নিদ্রাশূন্যতা।

হারসিয়াম—ক্রোধ ও উদ্বেগ ; আত্মীয়গণকে চিনিতে না পারা, নিজের উপর বিব প্রয়োগের ভয়, চৈতন্ত্যের সম্পূর্ণলোপ ; উলঙ্গ হইবার ইচ্ছা, ক্রমাগত বস্তু ফেলিয়া দেওয়া ; সম্পূর্ণ লজ্জাহীনতা।

ট্র্যামোনিয়াম—কামোন্মাদ এবং উন্মাদ ভাবভঙ্গী প্রকাশ ও ভাবা ব্যবহার। আলোকে ও জনসঙ্গ মধ্যে থাকিতে ইচ্ছা অন্ধকারে ও একা থাকিলে পীড়িত

রক্ষি, অত্যন্ত বাচালতা, কেবল প্রার্থনা ও যাক্সা করা, মুখের আরক্ততা ও স্বীত ভাব। ভয় ও নানা প্রকার বিকৃতভাব পূর্ণতা।

সলফর—ধর্ম সঞ্চকে চিন্তা করা ও আত্মজ্ঞানের আশাশূন্যতা, যে নাম ও শব্দ ব্যবহার করিতে চাহেন তাহার ভুল করা, তাগের বলহীন, চরণের শীতলতা এবং মধ্যে মধ্যে দুর্বলতা ভাব; স্নিগ্ধতার অভাব।

ভিরেটুম—ধর্ম সঞ্চকীয় মনোবিবাদ বা কামোন্মাদ এবং সকলকেই আলিঙ্গন করিতে ইচ্ছা, এমন কি জড়পদার্থকেও। শীতল জলের অধিক ভ্রা, ঠাণ্ডা ও শীতলকর দ্রব্যের প্রতি নিম্নত আকাজক।

ইহা বাতীত ইহাতে অসংখ্য অনেক ঔষধের প্রয়োগন হয়, এ চিকিৎসা অপেক্ষাকৃত কঠিন।

• শ্রীবিপিনবিহারী মৈত্র, এম বি। •

টন্সিল গ্রন্থির প্রদাহ।

Tonsillitis.

এই পীড়া আমাদের দেশে অধিক দেখিতে পাওয়া যায়। বিশেষতঃ শীতকালের শেষে ও প্রথমে অনেক লোককে ইহা দ্বারা আক্রান্ত হইতে দেখা যায়। গলার ভিতরে দুইদিকে ছোট ছোট দুইটা গ্রন্থি দেখিতে পাওয়া যায়, ইহাদিগকেই টন্সিল বলে, ইহার প্রদাহ উপস্থিত হইলে তাহাকে টন্সিলাইটিস্ বলা যায়।

কারণ—ঠাণ্ডা লাগিয়াই প্রায় এই রোগ হইতে দেখা যায়। গরম হইয়া বা ঝড় হইতে হইতে হঠাৎ ঠাণ্ডা লাগিয়া ঝড় থামিয়া গোল ও ইহা হইতে পারে, ঠাণ্ডা বাতাসে স্নান করিয়া বেড়াইলে টন্সিল প্রদাহ হইতে পারে, কখন কখন অল্প পীড়ার পরও এই গ্রন্থি আক্রান্ত হইয়া থাকে।

প্রথমে গলার সামান্য বেদনা হইতে থাকে, এই বেদনা ক্রমে বৃদ্ধি পাইয়া অত্যন্ত কষ্টকর হয়। গলা ফুলিয়া যায় এবং গিলিতে অতিশয় কষ্ট হয়, অথবা

সম্পূর্ণ অক্ষমতা হইয়া পড়ে। পরে টন্সিলে পুঁথ হইয়া গলার বাহিরেও ফুলিয়া উঠে। কখন কখন পাকিয়া পুঁথ কাঁটিয়া যায়, এবং তৎপরে রোগী আরোগ্যলাভ করে। ইহা হইতে মৃত্যু প্রায়ই ঘটিতে দেখা যায় না, তবে কোন কারণ বশতঃ রোগী নিজীব হইয়া পড়িলে বা রক্ত দূষিত হইলে মৃত্যু ঘটিতে পারে।

চিকিৎসা—হোমিওপ্যাথি মতে ইহার চিকিৎসা অতি উত্তম, কোন কষ্ট পাইতে হয় না, অথচ রোগী সহজে আরোগ্যলাভ করে। এণোপ্যাথি মতে ইহার চিকিৎসা অতিশয় কষ্টদায়ক। নানা প্রকার লাগাইবার ঔষধ তুলি করিয়া গলার মধ্যে দেওয়া বা তেজস্কর ঔষধের কুণ্ডি ব্যবহার করায় প্রভূত অপকার ঘটিয়া থাকে। আর ইহাতে রোগীর যন্ত্রণার অবধি থাকে না, তন্ম-বন্থ শিশুদিগের গলায় এই প্রকার ঔষধ প্রয়োগ করা যে কতদূর কষ্টকর তাহা যিনি একবার দেখিয়াছেন আর কখনই ভুলিতে পারিবেন না।

যদি রোগী প্রথমেই পাওয়া যায় তবে বৈলেডনা ইহার অব্যর্থ ঔষধ। গলা লালবর্ণ, টন্সিল গ্রন্থির বৃদ্ধি ও রক্তাশ্রণ, মাথাধরা, জ্বর প্রভৃতি লক্ষণ বর্তমান থাকিলে ইহা দেওয়া যায়। এই অবস্থায় চারি পাঁচ মাত্রা ঔষধেই সমস্ত ভাল হইয়া যায়।

জেল্‌সিমিয়ম ইহার আর এক উৎকৃষ্ট ঔষধ। বৈকালে শীত করিয়া জ্বর, সমস্ত শরীরে বেদনা, ও সমুখ কপালে মাথাধরা, জ্বর বৃদ্ধি হইয়া বেদনাও বৃদ্ধি হয়, গলার ভিতরে গভীর স্থানে বেদনা হয়, গিলিতে গেলে গলায় বেদনা প্রভৃতি ইহার লক্ষণ।

বার্‌রাইটা কার্ব বা বারাাইটা মিট্রিয়েটিকা ইহার সত্তম উপকারপ্রদ ঔষধ, অত্যন্ত তরুণাবস্থা হ্রাস হইয়া টন্সিল বড় থাকিলে ইহা দেওয়া যায়।

মার্কেউরিয়স সল্—ইহাতে অনেক রোগী আরোগ্যলাভ করে। বৈলেডনার পীড়া উপশম বা নিবারিত না হইলে, টন্সিলে পুঁথ হইবার উপক্রম হইলে এবং টন্সিল বড় হইয়া গলার গ্রন্থি সমস্ত প্রদাহিত হইলে ইহাতে উপকার দর্শে।

উপযুক্ত সময়ে মার্কেউরিয়স দিতে পারিলে পুঁথ হওয়া বন্ধ হইয়া টন্সিল স্বাভাবিক অবস্থা ধারণ করে, কিন্তু যদি পুঁথ হইবার উপক্রম হয় তাহা হইলে পাকিয়া উঠে এবং কাঁটিয়া পুঁথ বাহির হইয়া যায়।

এই উপরি লিখিত অবস্থায় হিপার সলফরও ব্যবহৃত ও ফলপ্রদ হইয়া থাকে। যদি দেখা যায় যে আর পুঁষ হওয়া নিবারিত হইল না, তখন প্রথম হইতে হিপার দিলে পাকিয়া পুঁষ বাহির হইয়া যায়, রোগী যদি সামান্য ঠাণ্ডা লাগিলেও অসুখবোধ করে, সর্দি হয়, শরীরের গ্রন্থি প্রদাহিত হয় এবং সেই সঙ্গে টন্সিলাইটিসও হয় তাহাতে হিপার অত্যন্ত উপকারী ঔষধ।

যে সমস্ত রোগী উপদংশগ্রস্ত বা পারদ সেবন করিয়াছে তাহাদের পক্ষেও হিপার উপযোগী। যদি গলার মধ্যে কাঁটা বেঁধার মত বেদনা হয়, গিলিতে পসেই বেদনা বৃদ্ধি প্রাপ্ত হয় এবং উহা কর্ণ পর্য্যন্ত বিস্তৃত হয়, তাহা হইলেও হিপার উত্তম।

যাহারা প্রতি বৎসর শীতকালের প্রথম বা শেষে গলা হ্রবদনা হইয়া কষ্ট পান বা টন্সিল প্রদাহিত হয়, তাহাদের সেই রোগ প্রবলতা দূর করিতে হিপার বিশেষ উপযোগী ঔষধ।

অনেকে সাইলিসিয়ার বিশেষ পক্ষপাতী। তাহারা বলেন পুঁষ হইবার সময়ে যদি গলার মধ্যে কোন স্থানে কাঁটা বিধিয়া আছে এমন বোধ হয় তাহা হইলে সাইলিসিয়ার বিশেষ উপকার দর্শিয়া থাকে।

আমরা অতি অল্পস্থানেই সাইলিসিয়াই প্রয়োগ করিতে পারিয়াছি। তবে পুঁষযুক্ত টন্সিলাইটিস বা সপুরেটিভ ফরমের রোগে ইহা দেওয়া হয়। অনেক সময়ে দুই এক মাত্রা সাইলিসিয়ার উচ্চ ডাইলিউসনে আরোগ্য কার্য সম্পূর্ণ হইয়া থাকে। ল্যাকেসিস ইহার আর একটা উত্তম ঔষধ। বাম টন্সিল আক্রান্ত হইলে বা রোগ বাম দিক হইতে দক্ষিণ দিকে বিস্তৃত হইলে ইহা দেওয়া যায়।

গলার ভিতর পরীক্ষা করিলে ক্ষুদ্র ইত্যাদি স্থানিকভাবে তত দৃষ্ট হয় না, হইলেও যোগের যন্ত্রণা ভয়ানক অত্যন্ত কষ্টকর থাকিলে ল্যাকেসিস উপযোগী।

অনেকে ইহাকে টন্সিলাইটিসের অদ্বিতীয় ঔষধ বলিয়া প্রশংসা করেন।

লাইকোপোডিয়াম, ল্যাক্ক্যানাইনাম, ফাইটোলাক্সো, ডল্কেমারা, রসটক্স প্রভৃতি ঔষধও কখন কখন ব্যবহৃত ও ফলপ্রদ হয়।

সুস্থ শরীরে ঔষধ-পরীক্ষা-প্রণালী ।

(HOW TO PROVE.)

১। ভীত বা তীক্ষ্ণ বীৰ্য্য ঔষধ অপেক্ষা মৃদু ঔষধের ক্রিয়া প্রকাশ পাইতে কালবিলম্ব হয় ।

২। সুস্থ শরীরের একটিমাত্র বিশুদ্ধ ঔষধ (Genuine and unadulterated) ব্যবহার করা বিধেয়। উদ্ভিদগণের রস এল্‌কোহল বা সুরাসারের সহিত মিশ্রিত করিয়া সেবন করা উচিত।

৩। যে সকল উদ্ভিদ সচরাচর পাওয়া যায় না, বা বিদেশ হইতে যাহাদের রপ্তানি করিতে হয়, তাহাদের চূর্ণ বা সজল আরক সেবন করিতে হয়।

৪। লবণাক্ত দ্রব্য (salts) এবং গঁদ (gums) জলে মিশ্রিত করিয়া সেবন করা উচিত।

৫। শুষ্ক ব্লফ বা লতার তেজের খর্ব্বতা হেতু উষ্ণ জলে ঐ দ্রব্যকে প্রক্ষেপ করতঃ উষ্ণাবস্থায়ই (Infusion) গ্রহণ করা কর্তব্য; কারণ শীতলাবস্থায় বিভিন্ন গুণপ্রাপ্ত হয়।

৬। ঔষধ সেবনকালে ঔষধ সেবনকারীকে (Prover) আহার বিহারাদি বিষয়ে পরিমিত হইতে হইবে। সমস্ত প্রকার উত্তেজক পানীয় পরিত্যাগ্য।

৭। জাতিগত বিভিন্নতা দেখিবার জন্য দ্বী ও পুরুষ উভয় জাতির দ্বারা ঔষধ পরীক্ষা করা উচিত। সম্ভবতঃ সহিত নিত্য শিশুকেও পরীক্ষার্থ গ্রহণ করা কর্তব্য।

৮। কঠিন দ্রব্যের (যাহাদের কঠিনাবস্থায় ভৈষজ্য-শক্তি প্রকাশ পায় না) ত্রিশ শক্তি তারল্যের ৪ টি কি ৬ টি অণুবটকা প্রত্যহ অনাহারকালে সেব্য। (ঐ পরীক্ষা-পদ্ধতিটি আধুনিক)। যতদিন না কোনও লক্ষণ প্রকাশ পায়, ততদিন ব্যবহার করা কর্তব্য।

৯। অল্প মাত্রা ঔষধ ব্যবহার করিলেই অনেক লক্ষণাদি প্রকাশ পাইতে

থাকে, এইজন্য অল্প মাত্রা হইতে আরম্ভ করিয়া অধিক মাত্রা এ পর্য্যন্ত ব্যবহার করা উচিত। *

১০। কাহারও কাহারও এক মাত্রার পরেই লক্ষণাদি প্রকাশ পাইতে থাকে। সেইরূপ স্থলে আরও দ্বিতীয় মাত্রা নষ্ট দিয়া ঔষধের ক্রমিক বা পূর প্রকাশিত লক্ষণাদির উপর দৃষ্টি রাখিতে হইবে। (Sequence of the Symptoms)। ইহাতে মুখ্য ও গৌণ ক্রিয়া জানা যাইতে পারে।

১১। কিন্তু ঔষধের সম্পূর্ণ লক্ষণ দেখিতে ইচ্ছা করিলে, অপেক্ষাকৃত বৃহৎ মাত্রার উপরূপরি কয়েক দিবস ব্যবহার করিতে হয়; আবার ক্রমান্বয়ে বহুদিন ব্যবহার করিলে, বিপর্য্যস্ত বা গোল্‌মেনে (Ambiguous Symptoms) লক্ষণ সকল প্রকাশ পায়।

১২। যখন ঔষধের কোনও লক্ষণাদি প্রকাশ পাইতে থাকিবে, তখন ঔষধসেবনকারী (পরীক্ষক) নানা ভঙ্গীর (Postures) দ্বারা দেখিবেন যে, কিসে তাঁহার সেই লক্ষণের বৃদ্ধি বা হ্রাস হয়; উপবেশন, শয়ন, ভোজন, পার্শ্ব-পরিবর্তন প্রভৃতিতে, গৃহাভ্যাস্তরে কি খোলা বাতাসে, কিসে তাঁহার অস্থির বৃদ্ধি পায়। প্রত্যেক লক্ষণ-প্রকাশের সময় নির্ধারণ করিয়া রাখা কর্তব্য।

১৩। এক ব্যক্তিতে যে, সমুদায় লক্ষণই প্রকাশ পাইবে, ইহা আশা করা যায় না; এজন্য এক একটি ঔষধ সাত আট ব্যক্তিতে পরীক্ষা করা উচিত। সমান মাত্রা ঔষধ সেবন করিলে এরূপ দেখা যায় যে, সেই একই পরীক্ষকের দ্বিতীয় পরীক্ষাকালে অবশিষ্ট লক্ষণ সমূহ প্রকাশ পায়।

১৪। পরীক্ষার জন্ত অল্প মাত্রা ঔষধ সেবন করা উচিত; অল্প ঔষধে মুখ্য ক্রিয়া প্রকাশ করে, অধিক মাত্রায় গোল্‌মেনে লক্ষণ প্রকাশ পায়।—এজন্য মুখ্য ও গৌণ ক্রিয়ার পার্থক্য বুঝা যায় না।

* অল্প মাত্রা ব্যবহার করা বিধেয়—কেননা বৃহৎ মাত্রা ব্যবহারে অনেক বিষাক্ত দ্রব্য প্রস্তুত হইয়া যায়। পারল (calomel) এক ড্রাম মাত্রার ব্যবহার করিলে ভেদ হয়, কিন্তু অল্প মাত্রা (যেমন এক গ্রেন) ব্যবহারে মুখ আইসে (Ptyalism)। আমাদের মধ্যে লক্ষ্য মাত্রা বলিলে ৩০ শক্তি ৪ চারিটি অণুবটিকা বুঝায় না।

It is the Idio-dynamic and not the genico-dynamic action of drugs we wish to elicit in our provings.

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১৫। পরীক্ষাকালে যে যে লক্ষণ প্রকাশ পায়, তাহার প্রত্যেকটিকেই স্মরণ রাখা কর্তব্য ; যদি পরীক্ষক অল্প সময়ে সে লক্ষণ প্রকাশ পাইতে দেখিয়া থাকেন, তথাচ সে সময়ে পুনঃপ্রকাশে এই বৃদ্ধিতে হইবে যে, সেই ঔষধ পরীক্ষকের প্রকৃতির উপযোগী।

১৬। পরীক্ষার পূর্বে ঔষধ-সেবনকারীর হৃৎপিণ্ডের আঘাত প্রতিঘাত, নাড়ী, প্রশ্রাব প্রভৃতি পরীক্ষা করিয়া রাখা কর্তব্য।

১৭। ‘ঔষধ-পরীক্ষা, বুদ্ধিমান, সত্যবাদী ও সুস্থ ব্যক্তি দ্বারা হওয়া কর্তব্য। চিকিৎসকের সম্মুখে বা কর্তৃবাদীনে এই কার্য সম্পাদিত হওয়া অতীব প্রয়োজনীয়। সামান্য লক্ষণ সমূহ যেন গুরুতর বলিয়া গরিগণিত না হয়।

১৮। চিকিৎসাগণের দ্বারাই এ কার্য সুচারুরূপে সম্পাদিত হয় ; কেন না, তাহারা প্রত্যেক লক্ষণাদিকে স্পষ্ট করিয়া ব্যাখ্যা করিতে পারেন। পরীক্ষাকালে পরীক্ষকের (বিশেষতঃ ভৈষজ্যতত্ত্বজ চিকিৎসকের) নিকট ঔষধের নাম গোপন রাখা কর্তব্য।

১৯। বাহ্যদের শারীরিক ও মানসিক স্বাস্থ্যের অবস্থা ভাল, তাহাদিগকেই এ কার্যে যোগদান করিতে আহ্বান করা কর্তব্য।

২০। দৈহিক লক্ষণ সহ মানসিক লক্ষণ লিখিতে পরীক্ষক যেন তাচ্ছীল্য করেন না ; কেন না মানসিক ও নৈতিক অবস্থার (Moral conditions) প্রতি বিশেষ দৃষ্টি রাখিয়া ঔষধ নির্বাচন করা যায়।

পূর্বেক্ত নিয়মানুসারে ঔষধ সমূহ বিশেষ পরীক্ষিত হইলে, আমরা ঔষধ-জনি পীড়ার প্রতিকৃতি প্রাপ্ত হই। সুস্থ শরীরে ঔষধ-পরীক্ষা সধকে ডাক্তার পাইপারের (Dr. Piper's directions) মত, “প্রত্যেক হোমিওপ্যাথিক চিকিৎসকের ঔষধ পরীক্ষা করা কর্তব্য।” দেশ, কাল ও পাত্র বিশেষে বিভিন্ন ঔষধ প্রকাশ পাইতে পারে। রাত্রিকালে শয়নের পূর্বে ঔষধ সেবন করিলে, ঔষধের নিগূঢ় (Secret operations of the medicine) ক্রিয়াগুলি নির্বিঘ্নে দেখা যায় ; এবং প্রাতে অস্ত্রান্ত বিকৃতলক্ষণ প্রকাশ পায়। আহ্বারের পূর্বেও ঔষধ সেবন করিয়া দেখা উচিত। অস্থ শরীরে ঔষধ-পরীক্ষার ফল সন্দেহব্যঞ্জক ; তবে উভয়াবস্থার লক্ষণ তুলনা করিলে, সত্যতার উপলব্ধি হয়।’

ডাক্তার গ্রিসেলিক্ বলেন, “ক্রমাগত অধিক কাল পর্যন্ত কোনও ঔষধ সেবন করিলে, প্রথম প্রথম তাহার লক্ষণ প্রকাশ পায়, অবশেষে অভ্যাস বশতঃ বিশেষ বিশেষ লক্ষণ ব্যতীত অত্যাশ্রয় লক্ষণ প্রকাশ পায় না, এজন্ত ঔষধ পরীক্ষা সময়ে মধো মধো বিরাম দেওয়া কৰ্ত্তব্য।” সকল সময়ে ঔষধ তারল্যাক্রমে ব্যবহার্য্য নহে। কেন না যেখানে ৫০।৬০ বা ততোধিক বিন্দু ঔষধ সেবন না করিলে কোনও লক্ষণ প্রকাশ পায় না, সেখানে সেই পরিমাণে “এল্‌কো-হল্” ঔষধের ক্রিয়া ব্যতিক্রম ঘটায়।” কেহ কেহ (হেরিং প্রভৃতি) বলেন, পাড়ি ও শরীরে এবং যাহারা সহজে পাড়িত বা শীঘ্র শীঘ্র ঔষধের ক্রিয়া অনুভব করে, তাহাদের শরীরে (Susceptible patients) ঔষধ পরীক্ষা করিতে পারা যায়; একরূপ স্থলে ত্রিশ শক্তির অণুটিকা ব্যবহার্য্য।

সম্প্রতি ডাক্তার কার্টিস্ (Dr. Curtis of New York) বলিয়াছেন, “সদৃশ-লক্ষণ দেখিয়া ঔষধ-ব্যবস্থা-কালে নিম্নলিখিত কথাগুলি মনে রাখা যুক্তিসঙ্গত; কার্বো, ক্যাল্‌কেরিরা, ফেরম্, ফস্‌ফরস্, সোডা প্রভৃতি আমাদের শরীরের উপাদান ও আহারীয় দ্রব্য হইতে সমুৎপন্ন, ঐ ঐ দ্রব্যের আধিক্যও সদৃশলক্ষণ প্রকাশ পাইতে পারে। অতএব ঐ সকল আহার্য্যবিষয়ে বিশেষ দৃষ্টি রাখিতে হইবে। সুস্থ শরীরে এইরূপে পরীক্ষা করিতে হইবে যে, ঐ সকল দ্রব্য অব্যবহারে কি কি লক্ষণ প্রকাশ পায়। তাহার মতে, এইরূপ পরীক্ষাকে (Negative Proving) বলা যায়; কিন্তু এ যুক্তি এলোপ্যাথি ও আই-সোপ্যাথির সহিত জড়িত বলিয়া আমরা উহার অনুমোদন করি না।

শ্রীরাইমোহন বন্দ্যোপাধ্যায়।

রোগী সমাচার

১। বাবু—কুমারের স্ত্রী। বয়স্ক্রম অনুমান পঁচিশ বৎসর, স্বর্ষকায়। কিন্তু সুস্থ শরীর বিশিষ্ট। একটীমাত্র সন্তান হইয়া জীবিত আছে, গত বৎসর এপ্রিল মাসের প্রথমে হঠাৎ রক্তস্রাব আরম্ভ হয়।

জরায়ু হইতে পরিষ্কার লাল বর্ণ রক্তস্রাব হইতে থাকে, পেটে বেদনা মাত্রও নাই, হস্ত পদ আলস, দান্ত পরিষ্কার হয় না।

রক্তের চাপ দেখা যায় না কিন্তু অল্পকণ পরেই জমাট বাঁধিয়া যায়, গা বমি বমি মধ্যে মধ্যে আছে। আমি তাঁহাকে ক্যালকেরিয়া আস' ৩০ ডাইলিউশন সকালে ও বিকালে খাইতে দিলাম। দুইদিন ঔষধ সেবন করিয়া রক্তস্রাব থামিয়া গেল। আট দিন পরে রোগীর স্বামী আসিয়া বলিলেন, রোগীর শরীর কয়েক দিন খুব ভাল ছিল কিন্তু কল্যাণ হইতে শ্বেত প্রদরের মত হইয়াছে, আমি গিয়া দেখিলাম রোগীর শরীর রক্তহীন ও দুর্বল হইয়াছে, নাড়ীতে কিছু জর আছে বলিয়া বোধ হইল, দান্ত পরিষ্কার হয় না, ক্ষুধা নাই।

নেট্রম মিউরিয়েটিকম ৩০ ডাইলিউশন সকালে একবার করিয়া দিতে লাগিলাম। ৫৬ দিনে রোগীর অবস্থা অনেক ভাল বোধ হইল, শ্বেত প্রদর বন্ধ হইল এবং শরীরের রক্ত দেখা দিল, দান্ত হইতে লাগিল ও ক্ষুধা বৃদ্ধি হইল, ঔষধ বন্ধ দিলাম। নেট্রম মিউরিয়েটিকম ৩০ মধ্যে মধ্যে এক একবার দিয়া এক মাসে রোগী সম্পূর্ণ স্বাস্থ্য লাভ করিলেন।

২। বাঁহু—চট্টোপাধ্যায়, বয়স্ক ৫৫ বৎসর, শরীর মেটা ও সুস্থ বটে। অনেক দিন হইতে কোষ্ঠবদ্ধজনিত কষ্টভোগ করিতে ছিলেন এবং মধ্যে মধ্যে জ্বালাপের ঔষধ ব্যবহার করিতেন। তাহাতে সাময়িক দান্ত হইত কিন্তু আবার যে সেই হইত। ১৩০৯ সালের শীতকালের একদিন দান্ত হইতে কষ্ট হইতে লাগিল, জ্বালাপ লইয়া সে যাত্রা যেমন দান্ত খোলাসা হইল তৎসঙ্গে অর্শ দেখা গেল।

বাহিরে একটা বল ছুঁথিতে পাওয়া যায় এবং মলদ্বারে কুট কুট ও জ্বালা করায় রোগী এই চৈত্র তারিখে আমার চিকিৎসাধীন হইলেন। রক্তস্রাব তৎবেশী এবে কিন্তু জ্বালা বহুলা ভয়ানক অধিক। মলদ্বার কুট কুট করা ও মলমাল্যের মধ্যে যে ক্ষুদ্র ক্ষুদ্র কোন পদার্থ রহিয়াছে এরূপ বোধ হওয়ার আমি তাঁহাকে এন্টিউলস হিপক্যাটিনম ৩য় ডাইলিউশন দিবসে দুইবার করিয়া খাইতে দিলাম।

ইহাতে জ্বালা বহুলা সব কমিয়া গেল, অর্শের বলি ছোট হইয়া ক্রমে অন্তর্ভুক্ত হইয়া গেল। রোগী অনেক সুস্থ বোধ করিলেন, রক্তস্রাব থামিয়া গেল।

যদি আর সমস্ত অবস্থা ভাল হইলে কোষ্ঠবদ্ধ থাকিয়া গেল।

সলফর ৩০ ডাইলিউশন একমাত্রা দিল্লম, তাহাতেও উপশম না হওয়ার,

আমি নব্বুতুমিকা ৩০ ডাইলিউশন একবার করিয়া ৭ দিন দিলাম, ইহাতে ফল দর্শিল। প্রত্যহ রীতিমত দান্ত খোলাসা হইতে লাগিল এবং রোগীও সম্পূর্ণ আরাম লাভ করিলেন।

পথ্য—মৎস্ত, মাংস লঙ্কার ঝাল প্রভৃতি নিবেদ্য করিয়াছিলাম, ফল মূল খাইতে অনুমতি দিয়াছিলাম। বিশেষতঃ পেয়ারা, আপেল, পেঁপে প্রভৃতি দিতাম, তাহাতে উপকার বোধ হইয়াছিল।

৩। একটা ছোট শিশু বয়স্ক্রম দুই বৎসর। গত এপ্রিল মাস হইতে আমরক্তের পীড়া হইয়া কষ্ট পাইতে ছিল। শিশুটির শরীর বড় কুশ হইয়া কেবল অস্থিচর্মে সার হইয়াছিল।

তাহার পিতা অনেক চিকিৎসা করান, শেষে কতকদিন হোমিওপ্যাথিক ঔষধ দেওয়া হয়। তিনি নিজেই মাকু'রিয়স কর, নব্বুতুমিকা, কলসিহ প্রভৃতি ঔষধ দেন তাহাতে কোন ফল হয় নাই।

আমরা দেখিগাম দিনরাত্রি ১১:০ বার দান্ত হইত। দান্তে মল অল্প কিন্তু আমরক্ত বেশী ছিল, বেগ হইত এম' শর্কের সঙ্গে মল ভাগ হইত। রোগী ভয়ানক খিটখিটে, সন্দাই ক্রন্দন করিত, ক্রমাগত মিছরী দিয়া বাধিতে হইত।

আমি তাহাকে আর্জেন্টম নাইট্রিকম ৩০ ডাইলিউশন দিবসে দুইবার করিয়া তিন দিন দিলাম, ইহাতেই রোগী সুস্থ হইয়া উঠিল। মল সহজ হইল, রোগ চলিয়া গেল, অ্যাস্‌চ্যোর বিষয় এত অধিক মিছরী খাওয়াও বন্ধ হইয়া গেল।

৪। বাবু উপেন্দ্র নাথ মজুমদারের পুত্র, বয়স্ক্রম ৪ বৎসর। পূর্বে অগ্ন ও লিভার হইয়া অনেক দিন কষ্ট পান, হোমিওপ্যাথিক মতে চিকিৎসা করিয়া আমি আরাম করিয়া দিয়াছিলাম।

বিগত তিন বৎসর ভুলই ছিল, গত ১৯০২ সালের আগষ্ট মাসে পেটের অস্থির হয়, দিবসে ৫৬ বার দান্ত হইতে থাকে। দান্তের রং অনেকটা সাদা অল্প হরিজাবর্ণ। পেট কামড়ানি অল্প আছে। দান্ত জলবৎ, মলযুক্ত, শরীরে অধিক, প্রাতঃকাল হইতে দশ এগরটা পর্যন্ত বেশী হয়, পরে ভাত খাইলে ক্রম পড়িয়া আইসে, পেটে বায়ু জমে। জল পিপাসা অল্প, বার বার হইয়া থাকে।

চক্ষু দুইটা হরিদ্রাবর্ণ। রোগীর পিতা বলিলেন শৈব রাত্রে একটু গা গরম বোধ হয়, আমি নাড়ী দেখিলাম অবের ভাব বোধ হইল না। কিন্তু ক্রমাগত দান্ত হইয়া রোগী ঢক্‌ল হইয়া পড়িয়াছে। আহা রে কেছা নাই।

পডফাইলম ৩০ ডাইলিউসন অটটী পুরিয়া দিয়া সকাল সন্ধ্যায় খাইতে বলিলাম।

দুই দিন ঔষধ সেবনে রোগীর দান্ত অনেক কমিয়া গেল ও কিছু শক্তও বোধ হইল।

ঔষধ দুই দিন বন্ধ করিতে বলিলাম, অবস্থা ঐকপই থাকিয়া গেল। আবার পডফাইলম ৬ষ্ঠ দিলাম, এবার দান্ত কঠিন হইয়া গেল ও বারেও অনেক কম হইল। ঔষধ বন্ধ করিলাম না। কিন্তু প্রতাহ প্রাতঃকালে একবার করিয়া দিতে লাগিলাম, এক সপ্তাহ ঔষধ খাইয়া রোগী সম্পূর্ণ আরোগ্যলাভ করিল। চক্ষু হরিদ্রাবর্ণ দিনকতক ছিল পরে দূরিয়া গেল।

শ্রীপ্রতাপ চন্দ্র মজুমদার এস ডি।

হোমিওপ্যাথিক চিকিৎসা-সার।

পক্ষাঘাত।

(PARALYSIS.)

কানা কারণে এই রোগ উপস্থিত হইয়া থাকে। ছোট ছোট শিশুদিগের এবং বৃদ্ধ লোকদিগেরই এই পীড়া অধিক হইতে দেখা যায়। ইহা শরীরের সকল স্থানেই হইয়া থাকে; সময়ে সময়ে সমস্ত শরীরই আক্রান্ত হয়। যে অঙ্গ আক্রান্ত হয়, তাহা নাড়িবার অথবা তাহা দ্বারা কোন প্রকার কার্য করিবার ক্ষমতা থাকে না। সমস্ত শরীর আক্রান্ত হইলে কখন কখন মল-মূত্রত্যাগ অসাধ্য হইতে থাকে, আবার কখন কখন উহা একবারে বন্ধ হইয়া যায়। ফলতঃ মস্তিষ্কের অথবা মেরুদণ্ডের স্নায়ুর বিকৃতি ঘটিলে এই রোগ উপস্থিত হইয়া থাকে।

হোমিওপ্যাথিকের অবিকর্তা মহাত্মা হানিমান বলিয়া গিয়াছেন, শরীরের
 • নিম্নদেশে পক্ষাঘাত উপস্থিত হইলে রসটক্স তাহার একটি উত্তম ঔষধ।
 আমরা এই ঔষধ অনেক বার প্রয়োগ করিয়াছি এবং বিশেষ ফলও পাইয়াছি।
 ঠাণ্ডা লাগিয়া অথবা বাতজনিত পক্ষাঘাত উপস্থিত হইলে এই ঔষধ বিশেষ
 উপকারী। বিকার অর অথবা কোনও কঠিন পীড়া আরোগ্য হইবার পর
 যদি এই রোগ উপস্থিত হয়, তাহা হইলেও রসটক্সে অত্যধিক উপকার দর্শে।
 বৃদ্ধদিগের পুরাতন পীড়াতেই ইহাতে বিশেষ উপকার হয়, তবে কখন কখন
 শিশুদিগের পীড়াতেও ইহা ব্যবহৃত ও ফলপ্রদ হইয়া থাকে। শিশুদিগের
 পীড়ায় সলফর বিশেষ উপকারী। ঠাণ্ডা লাগিয়া মুখ অথবা চক্ষু প্রকৃতির
 মাসপেশীসমূহ আক্রান্ত হইলে কষ্টিকম ও রসটক্সে উপকার দর্শে। ডলকামরা
 অনেক বিষয়ে রসটক্সের সমতুল্য। ঠাণ্ডা লাগিয়া অথবা ঠাণ্ডা স্থানে বাল
 লজ রোগ উপস্থিত হইলে ইহাতে উপকার হয়; কিন্তু তরুণ পীড়াতেই
 ইহার কার্যকারিতা অধিক। পুরাতন পাড়ায় প্রায়ই এই ঔষধ ব্যবহৃত
 হয় না। ঠাণ্ডা লাগিয়া পায়ের পক্ষাঘাত উপস্থিত হইলে ককিউলস্ উত্তম।
 ইহা প্রায়ই তরুণ পীড়াতেই ব্যবহৃত হইয়া থাকে। হিষ্টেরিয়া বশতঃ রোগ
 উপস্থিত হইলেও ইহাতে উপকার দর্শে। কখন কখন নেট্রম মিউরিয়াটিকমও
 এই রোগে ব্যবহৃত ও ফলপ্রদ হইয়া থাকে।

শীতকালে ঠাণ্ডা লাগিয়া রোগ উপস্থিত হইলে কষ্টিকম উত্তম। মুখে
 পক্ষাঘাত হইলে ইহার কার্যকারিতা অধিক। কোনও একটা মাসপেশী—যথা,
 মুখ, জিহ্বা, গলদেশ প্রভৃতি—আক্রান্ত হইলে ইহাতে বিশেষ উপকার দর্শে।
 ডাক্তার কাউপারথোয়েট অনেক রোগীকে এই ঔষধ সেবন করাইয়া রোগমুক্ত
 করিয়াছেন। আমি সম্প্রতি একটা অতি কঠিন রোগ এই ঔষধ প্রয়োগে
 আরোগ্য করিয়াছি। সুগী কথা পর্য্যন্ত বলিতে পারিতেন না। তিনি
 একটি সুশিক্ষিত লোক, কিন্তু এই রোগে আক্রান্ত হইয়া তিনি ইংরাজি
 অথবা বাঙালা অক্ষর পর্য্যন্ত পড়িতে পারিতেন না। এখন ইংরেজের রূপায়
 তিনি আবার পুনরায় পূর্বের মত কাজকর্ম করিতেছেন। অসাড় হইয়া
 ত্যাগ এবং শরীর হইলে ইহাতে উপকার হয়। বাতগ্রস্ত যদি চক্ষুর
 পাতা পড়িয়া যায়, তাহা হইলেও ইহাতে ফল দর্শে। ইহাতে দক্ষিণ দিকই

অধিক আক্রান্ত হয়। ক্যালমিয়া ও সিপিরাতেও চক্ষুর পাতা পড়িয়া যাইতে দেখা যায়, কিন্তু সিপিরাতে প্রায়ই উহার সহিত জরায়ুর পীড়া হুট হইয়া থাকে।

বৃক্কদিগের পক্ষে বেরাইটা একটি উৎকৃষ্ট ঔষধ।^১ জিহ্বা আক্রান্ত হইলে ইহাতে অধিক উপকার হয়। সন্ন্যাসের (apoplexy) পর পক্ষাঘাত উপস্থিত হইলে ইহাতে বিশেষ উপকার নির্দিষ্ট থাকে। ইহাতে রোগী স্থির হইয়া দাঁড়াইতে পারে না। হঠাৎ নড়িবার ক্ষমতার হানি হইলে জেলসিমিরম উপকারী। অধিক মানসিক উত্তেজনা হইতে রোগ উপস্থিত হইলে ইহাতে বিশেষ উপকার দর্শে। যদি নিম্নদেশ হইতে রোগ প্রক্টে শরীরের উপরের দিকে উঠিতে থাকে ঐ জ্বাতিশয় কঠিন অবস্থা ধারণ করে, তাহা হইলে কোনাম ব্যবহার করা উচিত।

কোনও কঠিন রোগের পর শিশুদিগের এই রোগ উপস্থিত হইলে আর্জেন্টম নাইট্রিকম উপকারী। বৃক্কদিগের নানা প্রকার দোষ হইতে পক্ষাঘাত উপস্থিত হইলে নক্সভমিকা উত্তম।

ঠাণ্ডা রাসা লাগিয়া অথবা অতিশয় ঠাণ্ডা জল রোগ উপস্থিত হইলে একোনাইট প্রায়োগে উপকার দর্শে। হেম্পল এই ঔষধের ভূয়সী প্রশংসা করিয়া গিয়াছেন। তরুণ অবস্থাতে ইহার কার্যকারিতা উত্তম। ঠাণ্ডা লাগিয়া রোগ উপস্থিত হইলে বসটক্স, সলফর এবং কষ্টিকম প্রযুক্ত হইতে পারে। বনবনানি অধিক হইলে কেনাবিস ইণ্ডিকা এবং টেকাইসেগ্রিয়া ব্যবহার্য।

পক্ষাঘাতের সহিত যদি কক্ষ লক্ষিত হয়, তবে প্রথম তাহার উৎকৃষ্ট ঔষধ। ইহাতে শরীরের নিম্নদেশ অপেক্ষা উপরিভাগ অধিক আক্রান্ত হইয়া থাকে। ইহাতে প্রায়ই অধিক কোষ্ঠবদ্ধ লক্ষিত হয়। কল্পনেস সহিত যদি পক্ষাঘাত উপস্থিত হয়, তাহা হইলে মার্কিউরিয়স, প্রথম ও হাইওসায়েনস ব্যবহৃত হইয়া থাকে।

প্রথমের পীড়া প্রায়ই মেরুদণ্ড হইতে উৎপন্ন হয়। প্রথমে প্রথমের অনেক লক্ষণ দেখিতে পাওয়া যায় বটে, কিন্তু ইহাতে আক্ষেপ অধিক হইতে দেখা যায়। কস্করল ও এলুমিনমও এই রোগে প্রযুক্ত ও ফলপ্রসূ হইয়া থাকে।

কোষ-প্রদাহ ।

(ORCHITIS.)

যদি কোন প্রকার আঘাত লাগিয়া অথবা কোনও প্রকার দৌৰহীনিত পীড়া হইতে কোষ প্রদাহিত ও ক্ষীত হয়, তাহা হইলে উহাকে অর্কাইটিস বা কোষপ্রদাহ কহে ।

কোনও প্রকার বাহ্যিক ঔষধ প্রয়োগে যদি প্রমেহের পুঁথি নির্গমন বন্ধ হইয়া পীড়া উপস্থিত হয়, তাহা হইলে পলসেটিলায় বিশেষ উপকার দর্শিয়া থাকে । ইহাতে কোষ অতিশয় ক্ষীত হয় এবং উপদ্রবের দিকে টানিয়া থাকে । টাটানি অধিক হইলে হেমিমেলিস উত্তম । ইহাতে আক্রান্ত স্থানে ভয়ানক ভার বোধ হয় । কোষমধ্যে স্নায়ুশূল হইলে অকজান্তিক এসিড প্রয়োগে উপকার হইয়া থাকে । বেদনা অসহ্য হইলে, এবং আক্রান্ত স্থান দপ্ দপ্ করিতে থাকিলে ও অতিশয় লালবর্ণ হইলে বেলেডনা বিশেষ উপকারী ।

প্রমেহ হইতে এই রোগ উপস্থিত হইলে অথবা ঠাণ্ডা লাগিয়া কোষ অতিশয় টাটাইয়া উঠিলে এবং রোগ ভয়ানক কঠিন আকার ধারণ করিলে ক্লিমেটস উত্তম । ইহাতে দক্ষিণ কোষে অধিক বেদনা হইতে দেখা যায়, ঘন ঘন প্রস্রাবের বেগ আইসে এবং রাত্রিকালে বেদনা অধিক হয় ।

ডাক্তার হেলমত বলিভেন হঠাৎ প্রমেহের স্রাব বন্ধ হইয়া অথবা ঠাণ্ডা লাগিয়া রোগ উপস্থিত হইলে জেলসেমিরম প্রয়োগ করা উচিত । যোগ্য পুরাতন হইলে এবং পেষণ করায় মত্ত বেদনা অন্তর্ভূত হইলে রডোডেনড্রন উপযোগী । ডাইন দিকের পুরাতন পীড়ায় অরম মেটালিকমের ক্রিয়া অতি উত্তম ।

পলসেটিলা ও হেমিমেলিস প্রয়োগে উপকার না হইলে স্পনুজিয়া ব্যবহারে সময়ে সময়ে বিশেষ উপকার দর্শিয়া থাকে ।

HINTS.

মার্কিউরিয়স আমাদের একটা উৎকৃষ্ট ঔষধ, কারণ লালানিঃসারক গ্রন্থিসমূহের উপর ইহার ক্রিয়া অতি ক্ষুদ্র। ‘অধিক টাটানি, অতিশয় লালানিঃসরণ, যুখে আতশয় চর্মেদ, এবং পাকিয়া উঠিবার উপক্রম হইলে ইহার কার্যকারিতা অধিক।’

সিমিসিফিউগা স্ত্রীলোকদিগের শ্বাসশূলে ব্যবহৃত হইয়া থাকে। ইহার সহিত প্রায়ই জরায়ুর পীড়া লক্ষিত হয়। ইহাতে বেদনা রাশ্মিতে অধিক হইতে দেখা যায়; কখন কখন বক্ষঃস্থলের বাম দিকেও বেদনা লক্ষিত হইয়া থাকে।

শ্বাস শ্বস্তের মধ্যে যে সমুদায় বায়ুনলী বা চুপী আছে তাহাদের মধ্যে দিয়া বায়ু আসা যাওয়া করে, সেই নলী গুলির নাম বায়ুনলী। এই নলী গুলির প্রদাহ হইলেই তাহাকে শারীরতত্ত্ববিদ পণ্ডিতেরা বায়ুনলীভুজ প্রদাহ অর্থাৎ ব্রঙ্কাইটিস্ বলিয়া থাকেন।

প্ল্যাংক্টোগো দন্তের বেদনার একটা উৎকৃষ্ট ঔষধ। আমরা এই ঔষধ বহুল প্রয়োগ করিয়াছি এবং অধিকাংশ প্রলেহ রোগী আরোগ্য লাভ করিয়াছে দেখিয়াছি।

মিজিরিয়ম ঠাণ্ডা লাগিয়া বেদনায় এবং উহা ক্রমে বিস্তৃত হইয়া পড়িলে উপকারী। পারদূষিত অথবা উপদংশরোগাক্রান্ত লোকের পক্ষে এই ঔষধ বিশেষ উপযোগী।

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THE INDIAN HOMEOPATHIC REVIEW

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.

MARCH 15, 1904.

No. 3.

Cure with High Potency and often with a single dose.

We have often been startled to find the efficacy of a medicine in high potency and very frequently with a single dose. Those, among our colleagues who have not hitherto had an opportunity of knowing it would do well to try and give a fair trial to high potency, and we are sure they will be convinced against their conviction.

Long years past I was in the habit of prescribing only the low attenuation of almost every medicine and my cures were not so speedy and pure as with the higher potencies. When I started for America and Europe, my conviction had been that some of our remedies are effective in high dilutions and the range was from the 30th to the 200th. The highest potencies that are in frequent use among many in America, were considered by me as a visionary project and they should be discouraged.

There in American cities I met many of our illustrious colleagues and had hot discussions with some. From all these

I was led to think that nothing should be thrown off without giving a fair trial. I believe it was Hon'ble Mr. Bonney who remarked to all present in the Congress of Homeopathic Physicians at Chicago, that we should not be afraid of new truths. Alluding to his allopathic friends he said—God is giving us lessons every day and why are you afraid of new lessons from Him. Homeopathy is a new thing from Him, give it a fair trial and if you find it false, throw it away. The something I can say to all our friends who do not believe in the efficacy of high potency.

I determined to try higher potencies in my practice and I did it extensively and carefully, and what is my conviction at present? I am thoroughly convinced of its efficacy and often astonished to observe that a single dose is necessary for curative purposes. I am going here to give you some cases which conclusively prove my assertion. Of course we must be in our guard to find out the exact similimum of the case and then only expect to get a brilliant result.

Case 1. A lady æt about 46 had an attack of dysentery about the beginning of January 1903. She was brought here by her son and placed under my treatment.

The lady was very much emaciated and prostrated. Had constant nausea and spitting of saliva from the mouth. About ten to twelve stools in twenty four hours.

Stools dark, brown fecal, profuse and watery, containing streaks of blood, much wind in stomach with loud gurgling, fear of passing wind as if it would soil the cloth with fecal matter. Stool also consisted of some mucus and of very offensive smell.

Aggravation, generally in the morning before breakfast viz from 6 A.M. to 10 A.M. After eating or drinking there was some increase of pains in abdomen, she feels better by pressure on the abdominal wall and by passing wind which was attended with difficulty. Appetite was good but she could

not digest the food well which sometimes passed with the stools.

Before I saw her she was treated with Merc Sol and Cor, Ipecac and Nux Vom by some other physicians. I gave her a few globules of *Aloe* 200 dry on the tongue. Next morning she had only one stool and it was rather formed. The pains were much mitigated and passed wind with much ease.

No medicine to-day and she kept well the whole day. Her son came and wanted more medicine to stop the next morning aggravation.

A few powders of Sac lac were all that was given her. She made a perfect recovery.

Case 2 Babu--Dutt, 55 years of age, fat and indolent-looking gentleman came under my treatment for hæmoptysis.

He was told by his medical attendant, an allopathic doctor, that his case is going on to be a real phthisis pulmonalis and so he wanted a better consultation. A European physician attached to the Medical College Hospital was called in and they treated the case with various allopathic medicines with very little effect. He was getting weaker. I was called to see him.

He complained of pain in chest and some difficulty in breathing. Blood dark and came out with some effort. There was no nausea or vomiting present.

I examined the chest thoroughly and with the exception of some bubbling sound something like mucous rales I found nothing. Percussion sound was normal.

I asked him whether he had some violent exertion or hurt on the chest but the answer was negative. He is an active man and works rather hard in the office. No family history of consumption traceable. I gave him a dose of Arnica 30 morning and evening. I came next day and found him better. No medicine but he complained of pain in chest though

less than before. I heard nothing from him for five days and on the sixth day I was suddenly called in the evening. The hemorrhage was alarming.

Arnica 200 one dose was ordered and hemorrhage stopped, never to appear till now. He was hale and hearty after that.

Case 3. An elderly gentleman has been suffering from piles for a long time. It was a bleeding piles at first but subsequently hemorrhage stopped but all other suffering remained as before. There was throbbing, burning and stinging pain in anus which was aggravated at night and for a few hours after stool.

The gentleman tried all sorts of medicine without much benefit. He came under my care on the 29th August 1896. He was much reduced in health, could not take his food well especially in the afternoon when he felt acidity and much flatulence in the lower bowels. Stools were always hard and abillious.

The suffering was so great after stools that he always tried to avoid going. A homeopathic physician in the neighbourhood gave him Nux Vom, Arsenic, Æsculus, Sulphur and Acid nitric to no effect. He therefore gave up hopes of cure by medicine and advised the family to resort to knife.

The son of the patient took me there and I examined the patient. There were two sinuses in the bottom of the hemorrhoidal knobs and these were extremely painful. There were some fissures observable on sides of the anal aperture. On the glütial region outside there were patches of ring-worms which were very itchy.

Graphites 30 one dose morning and evening for four days and then I was called. His stools were much better and pus from the sinuses less but the suffering after stool remained the same.

Graphites 200 one dose and no medicine for two days. No more improvement.

Lycopod 200 one dose morning and evening. Two days after I was called and to my great joy I found him much better. No medicine for a week. Almost in the same state. Again Lycopod 200 one dose a day. Much improvement. I now noticed as soon as medicines was given he was better but stoppage of medicine followed by rather an aggravation of his symptoms.

Lycopod Cm one dose dry on the tongue and the improvement was steady. I stopped the medicine and gave him Placebo one dose a day. The pain subsided at once and sinuses healed up.

I ordered for a change of climate and he went to Benares whence he returned after two months a picture of health.

Case 4. In fever cases, there is a general belief and even among homeopaths, that lower potencies, and with frequent repetition are required, higher potencies and in frequent doses are of no avail.

We have generally seen on the contrary that higher and less frequent doses are very efficacious. These remarks are applicable both to the typhoid, remittent and also intermittent fevers. Only a little patience and perseverance are required by the doctor.

A young lady had been laid up with fever for sometime which reduced her to skeleton. Big doses of quinine and other allopathic drugging were resorted to.

Now the fever assumed an intermittent type and a homeopathic physician was consulted. He gave her *Nux Vomica* in the beginning and *Natrum* subsequently both in the lower attenuations.

I was consulted by him and we found it a typical case of *Natrum Mur*. Fever came on at 9 to 10 A.M. with shivering, hands and feet were cold, hammering headache, unquenchable thirst in all stages, copious sweat which relieved the headache but not gone, rather constipated bowels.

I told him Natrum Mur is still the right remedy but he said that it had no effect, three days he gave twice.

I advised him to give it in higher potency which he does not like as he said he had no faith in them. However he agreed and gave her a dose of Natrum Mur Cm in the evening when fever subsided. To our great surprise the fever did not come the next morning. He wanted to repeat the dose and I prevented him, giving a few doses of placebo.

Perfect cure was effected with this single dose of Natrum Cm. In other fevers I noticed almost the identical effect with the higher and the highest potencies.

Some Peculiar Features in Cholera.

Much has been written about the ætiology, pathology, diagnosis, prognosis and treatment of Cholera, but still there are many things that come in the way of a practitioner in such places as Calcutta, where Cholera is both endemic and epidemic, according to the season of the year and the health of the city that require elucidation. Here a few others.

I. The very young and the very old are seldom attacked with cholera. Children sometimes suffer from cholera infantum, but in such cases the prognosis is not very unfavourable. Women are not as frequently attacked as men, and if attacked they generally have a mild form of disease. The very robust people are seldom attacked with Cholera but if attacked with the disease, they are generally of the worst type and the prognosis very unfavourable.

II. In those cases in which the onset of the disease is marked by a rise of temperature, be the evacuations as profuse and vomiting as frequent and troublesome the prognosis is generally favourable and a few doses of Aconite if timely administered is all that is necessary.

III: A constant fidgety condition, i. e. turning from side to side in a semi-conscious state is a bad symptom and the outcome is generally very serious. Rhustox, Arnica and Baptisia are good remedies for such a condition.

IV. People of this country are in the habit of taking a good bath and a nice cold drink after they have been moved a few times. This they do thinking that the system has been over-heated. If the evacuations are really choleric, then contracting a heavy cold by such a procedure is a very grave affair. These cases generally run on to the typhoid state and in spite of the best of treatment they are attended by most serious results. Rhustox is the only remedy that I know of that has been of any avail in such a condition. Then again sometimes in such a case the collapse stage comes on very quickly and it is very difficult to rescue the patient.

V: While still re-action has not set in, i. e. the pulse is still imperceptible and the evacuations, vomiting, cramps etc. have not abated, if brain symptoms supervene, then we must know that we have a most serious case to handle. Agaricus is a remedy that stands in good stead in such a condition.

VI. In Dr. P. C. Majumdar's book on *Cholera*, we find that no medicine is required during the stage of re-action but here I want to say that we must guard the case most carefully at the commencement of this stage, for should the re-action be imperfect i. e. the circulation is not equally distributed, the trunk, the head etc. are hot while the limbs are cold and the eyes injected, we must do something promptly or *Coma* will supervene and it will be very difficult to rouse the patient from such a condition. Belladonna is a good remedy for such a condition.

VII. Dr. Salzer in his most excellent work on *Cholera* says that Calc. Ars. ought to be a good remedy in cases that die suddenly of heart failure even when to all appearances

the patient seems to be getting well. I wish to corroborate that statement of that venerable doctor and say that I have successfully been able to save two patients from the jaws of death by the timely administration of this remedy.

VIII. The urinary secretion is generally stopped in Cholera, but we sometimes find cases in which the patients urinate as they are moved still they go on from bad to worse.

At times even when the patient is apparently cured, a diarrhoea continues, which is very distressing and difficult to cure. Podophyllum is the remedy in such a condition. If the discharges are excessively offensive then we have a good friend in Psorinum. I will conclude this article by saying that here in Cholera as well as in all other diseases we should not forget Sulphur when the well selected remedies fail to act.

J. N. Majumdar. M. D.

A Plague Case.

I was called to see Babu K—who has been suffering from what some of our eminent specialist in this city called to be a case of Plague. It was about, 11 o'clock in the night that I saw him a youngman who was supposed to have been dying. He was lying in a comatose condition, the pulse very frequent and occasionally intermitting, the temperature 106, the face flushed, the abdomen slightly tympanitic, both the inguinal glands enormously swollen and inflamed, the right axillary gland partially so; he was perfectly unconscious, with muttering delirium, and the breathing was slightly hurried and stertorous. I gave him Ant tart. 30 to be taken every hour until the breathing was better and he regained consciousness. Very early the next morning I was summoned to the bedside of the patient, when I found that he was decidedly better. The breathing was much greater, and he looked much more pacified than on the last occasion, but as yet he had not regained

consciousness. He was talking incoherently, would get angry with his old father and mother for nothing. His eyes were injected but the pulse much better than on the previous night. His temperature this morning was about 103, passed water once during the night but no stool. I gave him Hyosc. 30, three times during the whole of that day. I visited the patient again in the night, when he looked still better. His face was less and began staring at me. Once or twice he seemed to recognise me, then again he got vehement and began abusing me in the vilest language. At this his people became terrified and began entreating me and asking not to take offence. I gave him Hyosc. 200 one dose with plenty of Placebo during the night. Nothing could surpass my delight when I entered his room the next morning and found him lying quietly in his bed, very much prostrated and looked as if a storm had passed over him. This time he saluted me as I took my seat by his side. He could now answer any questions by nodding his head and uttering indistinct words. The eyes looked much clearer, but the left cornea looked slightly ulcerated. The buboes had gathered and seemed to be pointing, but the axillary swelling completely disappeared. I gave him Argent. Nitr. 30 twice that day, and saw him again the next morning, when I found that the buboes had opened of themselves, the process having been helped by the leeches that were applied to these places by my predecessors the allopaths. I now began giving the patient more substantial food than I had hitherto allowed and continued the Argent. Nitr. 30 for two three days. In a week's time the patient was completely restored to health, but for the ulceration of the cornea which troubled him for some time still, and ultimately yielded to Arg. Nitr. 200.

It is now over a year and the gentleman is now enjoying perfect good health and brings me many a patient in grateful remembrance of his case.—*J. N. Majumdar, M. D.*

Editorial Notes

It is with deep regret that we have to record the death of Dr. Mohendra Lal Sircar. C. I. E., the first homeopathic physician of India. This melancholy event took place at his residence in Nebutola early in the morning of Tuesday, the 23rd February 1903. The void, that has been created in the homeopathic profession of Calcutta by the death of Dr. Sircar, is one that will be difficult to fill. Dr. Sircar was known in India not only as a homeopath, but a great literary and scientific man. Elsewhere will be found a short history of the life and career of Dr. Mahendra Lal Sircar.

"The doctor's position is like that of a gardner who wants to grow apples. Only nature can grow apples; but then it is crab apples that she grows unaidedly, not edible apples. No gardener can grow apples or crabs of himself; that has to be done by Nature herself organically. But although no gardner can grow either crabs or apples of himself, yet, guided by human wit and experience, the gardner can compel Nature to grow apples of the finest sorts and varieties; he need not ask Nature's permission at all, he merely arranges Nature's forces so that she produces the apples required. This, I take it, is the true positiqn of the physician. It is only Nature that can heal any thing really and yet Nature cannot heal many things at all till the physician gardner arranges her forces so as to compel Nature to grow apples in lieu of crabs. The physician's position is like an apple grower, further in that Nature requires time to grow apples; so also is it with Nature's healing ways, Nature requires time; any attempt to cure in less time than she needs for her organic processes results in a failure—absolute failure". (*Enlarged Tonsils*. pp. 18, 19).

"For us Homeopathy means the law of *Similia* in therapeutics. This is the one bond that will bind together

the writers in, and the readers of the *Homeopathic World*; this only is one cardinal doctrine. All those who hold that doctrine *openly* are with us, and we with them. The *crypto*-homeopaths we despise; the honest haters of homeopathy we may at least respect. But we cannot respect the mean men that have crawled into professional chairs with the aid of purloined portions of the homeopathic *Materia Medica* and simultaneous abjurations there of. These creeping things inspire disgust.

"For us Hahnemann is a blessed benefactor of our race, a star the first magnitude in scientific medicine; we love and honour his name in deed, we will love and honour it in word, please or displease whomsoever.

"While *Similia Similibus Curantur* is thus our one cardinal doctrine, we do not consider that all medicine was a blank before Hahnemann thought it out and worked it out, or that all medical progress was interred with him; for us, it is neither the in-all, nor the be all, nor the end-all of practical medicine—it is the truth, but it is not all the truth."

A passed student of the homeopathic school, Manmatha Nath Ghose, reports a very interesting case of vicarious menstruation cured by Pulsatilla. The patient, a young lady of 18 years was suffering for hematemesis for about 4 days when she was treated by an allopathic doctor who tried all sorts of medicines but in vain. Then a renowned homeopath was called who treated her for two days without any benefit. When the case came under Dr. Ghose's treatment, the history of the case revealed that the menstruation was stopped and that this hemorrhage had appeared just at the menstrual period. A few doses of Pulsat 30 promptly checked the hemorrhage.

A meeting was held in the hall of the Indian Association for the Cultivation of Science at the instance of the Hahne

mann Society of Calcutta, on Sunday the 6th inst, to consider what steps should be taken to commemorate the memory of the late Dr. Sircar. Raja Peary Mohon Mukerjee, C. S. I., was in the chair. There was a large attendance of the friends and admirers of Dr. Sircar. The following resolutions were passed:—(i) That the meeting desire to record their deep sense of the profound loss the country has sustained in general, and the medical profession in particular, by the lamented death of Dr. Mohendra Lal Sircar, late President of Hahnemann Society; (ii) that this meeting tender their heartfelt sympathy and sincere condolence to his family in their sad bereavement; and (iii) that this meeting authorises the Hahnemann Society to appoint a committee, with power to add to their number, for the purpose of collecting funds, with a view to perpetuate the memory of Dr. Sircar in some suitable form.

The many friends and admirers of Dr. L. Salzer, the first Homeopathic physician of Calcutta, would be very sorry to learn that the learned doctor has been compelled on account of ill health to retire from practice for the present. The doctor is shortly leaving town for Kurseong in quest of health.

Obituary.

Mohendra Lal Sircar, M. D., C. I. E., D. L.

Dr. Mahendra Lal Sircar, who was born on the 2nd November, 1833, in Paikpara, a village eighteen miles west of Howrah, lived and died an orthodox Hindu. He was not unfamiliar with the other religions of the world, for, possessing one of the finest private libraries in the city, he was one of the best read men of the day in India and a constant student of the Bible. But his faith in the religion of his forefathers remained unshaken, and he died as already mentioned, a Hindu. Mahendra Lal's youthful career resembles, in some

respects, that of another gifted Indian gentleman namely, Dr. Gurudas Banerji, the recently retired Judge of the Calcutta High Court. It was at the age of five that he was brought by his mother, together with an infant brother, to the house of his maternal uncle in Nabutola, a locality which endeared by early association, he never afterwards left. The family had not long been in Calcutta when the father died in Paikpara at the early age of thirty two. Mahendra Lal returned, with his mother, only once to Paikpara; that was on the occasion of his father's *shrad* ceremony.

Young Mahendra Lal received his elementary education in the vernacular in a *Patshala*, and his English education under the late Babu Thakur Dass Dey, to whom he remained attached to the last. He was admitted to the Hare School, where he studied till 1849, and then, having obtained a junior scholarship, he entered the Hindu College, where he continued his studies till 1854 under such able professors as Messrs. Sutcliffe and Jones of the Indian Education Department. He could have remained a year or two longer in the College, which then became the Presidency College, but his ardour for science had become so great that after considerable difficulty in endeavouring to pacify Mr. Sutcliffe, he eventually obtained permission to join the Calcutta Medical College, where some of the most important sciences were taught practically. After six years he passed the L. M. S. examination. It is said that at the Medical College he was the pet of all the Professors. His career in the Medical College was brilliant. He obtained medals, prizes, and scholarships in Botany, Physiology, Medicine, Surgery, and Midwifery. He was sometimes ahead even of his professors in information in their own subjects. For instance, it is related of him that he lost his gold medal in Medical Jurisprudence for having stated in answer to a question that the lethal dose of arsenic was much larger than stated in books, and that men were known who had

accustomed themselves to taking it, without injury, in doses of more than a drachm. This was looked upon by the then Professor of Medical Jurisprudence as a grave mistake. The Professor evidently had not read that most recent medical periodical on whose authority Sircar had made the statement. At the instance of Dr. Fayer he went up for the M. D. examination in 1863, and came out first, the late Dr. Jagabandhu Bose being second. Dr. Sircar was the second M. D. of the Calcutta University, the late Dr. Chunder Kumar Dey being the first. In this year the Bengal Branch of the British Medical Association was established through the exertions of the late Dr. Chuckerbutty. At the inaugural meeting Dr. Sircar made a speech denouncing homeopathy. This speech attracted the attention of the late Babu Rajendra Dutt, who thought he saw in him one who, if converted, would advance the cause of homeopathy. But his arguments were of no avail. Dr. Sircar did not deny the cures which his fellow practitioner claimed to have effected, but he attributed them to the strict regimen enjoined. One day a friend asking him to review Morgan's *Philosophy of Homeopathy* for the *Indian Field*, he readily agreed, thinking it would give him an opportunity of exposing the absurdity of the system. The first perusal of the pamphlet convinced him, however, that it could not be properly reviewed without previous practical acquaintance with the system. This led him to observe cases under Babu Rajendra, and it was not long before he arrived at the conclusion that the profession had been doing a gross justice to the system by condemning those who adopt it. Thereupon he delivered the address in medicine under the title, of the "Supposed Uncertainty in Medical Science," etc. The story that led to his being ostracised from the profession was briefly related in the *Calcutta Journal of Medicine* for July, 1903, and it is scarcely necessary, for the purpose of this notice, to repeat it here. Suffice it to say that ever afterwards

Mahendralal remained a staunch homeopath, effecting many remarkable cures under the new system, and establishing an extensive practice which only failing health compelled him to relinquish in later years.

The *Calcutta Journal of Medicine*, which was started in January, 1868, and is still in existence, was intended to promulgate the homeopathic system of the treatment of disease. In its number of August, 1869, Dr. Sircar published an article, "On the Desirability of a National Institution for the Cultivation of the Physical Sciences by the Natives of India." This was practically the starting point of the Indian Association for the Cultivation of Science, which however, was not established until some six years afterwards that is, in 1876. Dr. Mahendra Lall Sircar was appointed a Fellow of the Calcutta University in December, 1870, and was placed on the Faculty of Arts. Eight years later, in 1878, by a resolution of the Senate at its annual meeting, he was placed on the Faculty of Medicine. The members of the Faculty protested and objected to associate with one who professed and practised the absurd and unscientific system of homeopathy, but the Senate upheld their resolution. Thereafter he remained unmolested. Steadily he grew to be a power in the land, and successive Lieutenant-Governors and Viceroy considered it a privilege to be associated with him especially in furthering the claims of scientific education of the rising youth of this country. In such high estimation was he held by Government that he was given many honorary appointments of importance. He had, for instance, been Presidency Magistrate (1877); Member of the Bengal Legislative Council, being re-elected for the fourth time; Sheriff of Calcutta for 1888; President of the Faculty of Arts for four years (1893-97); ten years a member of the Syndicate; for several years member of the Council of the Asiatic Society of Bengal; Trustee of the Indian Museum, etc. The deceased gentleman obtained

the honorary degree of D. L. of the Calcutta University in

Besides being a distinguished man of letters and science, the late Dr. Mahendra Lal Sircar was a philanthropist in the truest sense of the word. No struggling student ever appealed to him in vain, while for many years he maintained a Charitable Homœopathic Dispensary, where he gave advice and medicine free to all classes and creeds. In recent years he established a Leper Asylum in Madhupur, a station on the East Indian Railway. Physician, man of science, philanthropist, educationist, —Maltendra Lal Sircar was indeed a man in whom the Indian people do well to take pride.

Manager's Notes.

All new subscribers to the *Indian Homœopathic Review*, who send Rupees Five to the Manager, will receive the Review for the year 1904 and a copy of Dr. P. C. Majumdar's *Therapeutics of Cholera*, published by Messrs Boericke and Tafel, New York., whose price is Rs 2. 0. 0.

All old subscribers who send two new subscribers or Rupees Eight will get a copy on payment of *one Rupee*.

This concession will hold good till the 30th April 1904. I hope no one will lose this opportunity.

Repeated calls have been made to the Subscribers, but none have been of any avail. I am now rather reluctantly compelled to inform each one of them through the columns of this paper that unless they clear up their arrears before the issue of the April number, no paper will be sent from next month, I have to uselessly spend postage in giving them reminders and polite calls. This does not speak highly of

our native subscribers. I must say that it is my principle to have a few subscribers, who pay regularly than to have a host of such people who do not care to reply my calls.

It has been resolved to make some material change in the *Indian Homeopathic Review*. The English portion will be separated from the Bengali portion and will contain 32 pages of reading matter, the subscription will be Rs. 4 in advance; the Bengali portion will be likewise separately printed, and will contain 24 pages, the subscription will be Rs. 2 per annum in advance. But those who are willing to subscribe both the editions, will have them on payment of Rs 5 per annum in advance. Each of the Subscribers are requested to let me know of this on or before the 30th April as to which one they will subscribe, and remit accordingly. But the arrears of subscription must be paid up before that date.

Clinical Lecture.

For the purposes of this lecture we will make no divisions between Amenorrhœa, Dysmenorrhœa, or other forms of disease incident to woman, but consider the medicines applicable to such conditions, in a more general way.

If you are called upon to prescribe for a lady who does not menstruate, but complains of painful pressure in the rectum; worse from walking, which causes stitching and burning, think of *Petroleum*. It will be still stronger indicated if she has *sensation of repletion after a little food*, similar to *Lycopodium*, and has a tendency to chapped skin, fistulæ or unhealthy skin generally. *Sepia* has sensation of a lump in the rectum, and *Ignatia* of a long stitch.

When the time comes to menstruate, if there is pain from the Sacrum through to the pubes; sensation of motion in the abdomen and thick fætid, yellow leucorrhœa, *Sabina* will

be likely to help. If she has a severe cramp in the abdomen which darts into the chest, together with nausea, retching and vomiting small quantities of frothy substance, give *Cuprum acet.*

I have succeeded in curing some of the most obstinate cases of painful menstruation with *Actea rac.* The symptoms are : violent griping pains in the hypogastric regions, causing her to double up. These pains commence before the flow and as the flow increases the pain increases, until the flow has reached its maximum point, the pains then subside. I have cured one case of 9 years standing, where a Homeopathic Physician had failed and recommended surgical interference. When the patient takes cold easily ; has blotches all over, specially in cold, damp weather, liable to take cold in the head ; *Dulcamara* may help. In cases where the menses are suppressed and it is followed by acrid, corrosive smarting leucorrhœa ; smarting cutting pains ; very difficult stools ; they come down to the verge of the anus and then slip back, *Silicea* is important. Acrid, corrosive discharges are characteristic of *Silicea*. *Cal. carb* has vertigo on going upstairs ; can't bear clothes tight around her waist, sensation of swelling of the abdomen ; easily fatigued. She formerly had her menstrual flow too soon and too profuse chlorotic. Tendency to dropsy.

The *Chamomilla* patient is cross and uncivil ; one cheek is red and the other pale.

Sometimes the menstrual function is vicarious, the patient at every monthly period having a hemorrhage from the lungs or other parts. In case the lungs are the vicarious seat, you will find *Phosphorus* one of the most important medicines. *Phosphorus* patients usually menstruate regularly but profusely, and not uncommon symptoms are : vertigo on rising in the morning with weakness in the legs so that for a few moments after getting out of bed they can stand ; must be down a few minutes before they can go about. This medicine is more applicable to diarrhea than to constipation, but there is a

form of constipation to which the *Phosphorus* patient is subject, which Dr. Guerensey has aptly described as the dog stool ; small, hard, dry, and accomplished with much straining, etc.

If your patient is very weak and prostrated, and has a clear countenance, frail look, and has great desire for acids. *Arsenic* will often help. For the throbbing headache which frequently follows suppressed menstruation, with injected eyes and aversion to light or noise ; numbness of the legs, quick movements and anxious expression of face ; great thirst and anxious grasping at the tumbler, vicarious menstruation, Dr. Guerensey recommends *Belladonna*. I can say that in my hands no medicine is so often applicable to cases of sudden suppression, as this agent. The patient usually suffers from fulness, heat, sensitiveness and weight in the hypogastric region, one dose of *Belladonna* 2c. generally brings on the flow in two or three hours.

Sometimes connected with menstrual ailments, you will have patients complain of stitching pain through the right pectoral region, if this is connected with nasty expectoration, *Borax* will almost surely help. Vertigo on going down stairs is, however, more frequently met with in disorders of this kind, and is just as characteristic of *Borax*. It also, has vicarious menstruation with watery, brown diarrhea.

B. B. Maitra, M. B.

New Publications.

Diseases of the Urinary Organs, including Diabetes Mellitus and Insipidus, by Cliford Mitchell A. B. M. D., Professor of Renal Diseases in the Chicago Homeopathic Medical College etc. Illustrated 716 pages. Philadelphia and, Chicago, Boericke and Tafel 1903.

This work of Dr. Mitchell is intended for the busy doctor. It contains many things valuable in the domain of pathology and general diagnosis. Surgery has taken an important portion of this book for which the author is assisted by Dr. Adams of Chicago. So far so good. But the therapeutic part of the work is a complete failure. Not only that, but he has included in this work many drugs which should find no place in the work of homeopathic system of medicine. We have seen many things in this book advocated by the author that have even been found of no effect by the allopathic physicians in this department of medicine. We should be very glad if the author would devote a greater care and attention in giving us a complete therapeutic hints of our valuable remedies in urinary disorders. We especially would be thankful to the author if he says something from his varied experience about Diabetes Mellitus and Insipidus. Great credit is due to the Publishers for papers, types and binding of the book.

Syllabus of Lectures on Physiology by William H. Bigler, A. M., M. D., *Professor of Physiology and Pediatrics, Hahnemann Medical College, Philadelphia.* Second Edition, Revised and Enlarged. Philadelphia, Boericke and Tafel, 1903.

This syllabus of lecture is very useful for students preparing for the examination on this subject of Physiology. It is also equally useful for busy practitioners and scientists to refresh their memory. We recommend this work to both. It is creditable to the Publishers for first class paper and printing.

ইণ্ডিয়ান হোমিওপ্যাথিক রিভিউ ।

১৩শ ভাগ ।

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হোমিওপ্যাথিক ঔষধ সেবন প্রণালী ।

আজ কাল সকলেই হোমিওপ্যাথিক ঔষধ সেবন করিতে আরম্ভ করিয়াছেন কিন্তু কি প্রণালীতে ঔষধ সেবন করিতে হয় তাহা জান অনেকেরই নাই । সেই জন্য আমরা অন্য প্রধান প্রধান বিষয়গুলি এই স্থলে প্রকটন করিব ।

প্রথমতঃ আমাদের দেশের লোকে কবিরাজী ও এলোপ্যাথিক ঔষধ সেবন করিয়া আসিতেছেন, সুতরাং ঔষধ সেবন বিষয়ে তাহারা সেই নিয়ম অবলম্বন করিতে চান । বেশী পরিমাণ ও অধিক বার ঔষধ খাইতে দিলে ক্ষীণ রোগ উপশম হয় বলিয়া সকলের বিশ্বাস আছে, হোমিওপ্যাথিক ডাক্তারের নিকটেও তাহারা সেই প্রকার ব্যঙ্গ প্রত্যাশা করেন ।

হোমিওপ্যাথি মতে তাহা হয় না । রোগের লক্ষণ সকল স্থির করিয়া তাহার সহিত মিলাইয়া ঔষধ প্রয়োগ করিতে হয় । পুরাতন পীড়ার একবার-মাত্র এক মাত্রা ঔষধ সেবন করিয়া তাহার বিরূপ ফল হয় বুঝিয়া তৎক্ষণাতঃ দ্বিতীয় মাত্রা ঔষধ দেওয়া আবশ্যিক হয় । যদি প্রথম মাত্রাতেই রোগীর অবস্থা অত্যন্ত ভাল হইয়া যায় তাহা হইলে দ্বিতীয় মাত্রা না দিয়া অপেক্ষা করা উচিত । দুইচার বা অধিক দিন অপেক্ষা করার পর যদি দেখা যায় যে রোগ আবার বৃদ্ধি প্রাপ্ত হইতেছে, বা সমভাবে আছে তাহা হইলে আর এক মাত্রা ঔষধ দিতে পারা যায় । পরে আবার অপেক্ষা করিতে হয়, এইরূপ করিতে পারিলে রোগ ক্ষীণ উপশম এবং দূর হইয়া যায়, নতুবা ক্রমাগত ঔষধ দিতে থাকিলে রোগ বৃদ্ধি প্রাপ্ত হইয়া জুঃসাধ্য হইয়া উঠে ।

পুরাতন পীড়ার ইহা বেশ দেখিতে পাওয়া যায় এবং অপেক্ষা করিলেও ক্ষতি হইতে পারে না । তরুণ পীড়ার সব সময়ে এ নিয়ম খাটিতে পারেন না ।

ইহাতে রোগের প্রবলতা অল্পভব করিয়া অনেকবার ঔষধ প্রয়োগ করিবার দরকার হয়। তখন সময় বড় বহুমূল্য হুতরাং যখন বিশেষ উপকার না দেখা পর্যন্ত বার বার ঔষধ দেওয়া আবশ্যক হইয়া উঠে। কিন্তু যখন একবার বেশী উপশ্রম দেখিতে পাওয়া যায় তখন ঔষধ বন্ধ করিয়া ভ্রাহার ক্রিয়া দেখা উচিত।

এ বিষয়ে মহাত্মা হানিমান বাহা বলিয়াছেন তাঁহা অতীব উপযোগী এবং উপকার প্রদ। তিনি বলিয়াছেন জীবন ধ্বংসকারী তরুণ পীড়ায় ঔষধ শীঘ্র শীঘ্র প্রয়োগ করিতে হয়, যেমন ওলাউঠা, বিকার, জ্বর, প্লেগ প্রভৃতিতে দুই, তিন ঘণ্টা অন্তর এক একমাত্রা ঔষধ দিতে হয়, এমন কি কখন কখন এক ঘণ্টা ও অর্দ্ধ ঘণ্টা অন্তরও ঔষধ দিতে হয়।

এ বিষয়ে দুই দিকেই বিশেষ গোঁড়ামী দেখিতে পাওয়া যায় এবং তাহাতে অনেক সময় বিষমর ফল উৎপন্ন হইয়া থাকে। আমরা জানি একজন এই নগরের চিকিৎসক একটী ওলাউঠা রোগী দেখিতে যান, রোগীর অবস্থা শোচনীয়। তিনি এক মাত্রা আর্সেনিক দিয়া রোগীর আত্মীয়দিগকে বলিয়া যান আট ঘণ্টা পরে সংবাদ দিলে ঔষধের ব্যবস্থা করিব। " রোগীর আত্মীয়েরা বলেন এত দেরীতে সংবাদ দিলে অপকার হইতে পারে। চিকিৎসক প্রবর বলিলেন যদি রোগী মরিয়াও যায় তথাপি ঔষধে মাত্রা বেশী দিতে পারিব না। রোগ ক্রমে বর্ধিতাবস্থা প্রাপ্ত হইল, রোগীর আত্মীয়েরা শীঘ্র শীঘ্র ঔষধ দিতে অনুরোধ করিলেন, তাঁহাদের অনুরোধ রক্ষিত হইল না। পরিশেষে নিরুপায় হইয়া তাঁহারা অভ্য চিকিৎসককে আহ্বান করিলেন। তিনি ঐ আর্সেনিক তিন চারি ঘণ্টা অন্তর প্রয়োগ করিয়া রোগী আরাম করিয়া তুলিলেন।

আমরা কুনিরাছি একজন এই কথা বলার সেই পূর্বোক্ত চিকিৎসক বলিয়াছিলেন তিনি প্রকৃত হানিমানের উপদেশ মত চিকিৎসা করিয়া থাকেন। আমরা দেখাইলাম স্থলে হানিমান কি উপদেশ দিয়াছেন। চিকিৎসক প্রবরকে আমরা হানিমানের অরগেনন নামক পুস্তকখানা ভাল করিয়া পাঠ করিতে অনুরোধ করি। এরূপ কঠিন স্থলে আমরা এইরূপ কার্য করিয়া থাকি এবং তাহাতে অনেক উপকার পাওয়া যায়।

রোগের বর্ধিতাবস্থায় বিবেচনাপূর্বক দুই তিন ঘণ্টা অন্তর অথবা

ওলাউঠা রোগীর ভেদ বন্ধনের পর একএক মাত্রা ঔষধ দিতে থাকি, কিন্তু যখনই দেখিলাম একটু উপশম হইরাছে তখনই ঔষধ বন্ধ করিয়া প্রতীক্ষা করি। অবস্থা অল্পরূপ দাঁড়াইলে ঔষধ পরিবর্তন করিয়া থাকি, কখন বা ঐ ঔষধ আরও কিন্তু প্রয়োগ করি, এরূপ না করিলে বড় বিপদ ঘটে। ভয় পাইয়া ক্রমাগত শীত্ৰ শীত্ৰ ঔষধ দিলে ঔষধের উপকার আর না হইয়া ঔষধ জনিত রোগ বৃদ্ধি বা এগ্রাভেসন্ হইয়া থাকে। তাহাতেই রোগের লক্ষণ সকল অল্প আকার প্রকাশ পায় বা ঐরূপ লক্ষণই বৃদ্ধি প্রাপ্ত হয়। ইহা আমাদের মনঃকল্পিত কথা নচে, ইহা প্রত্যক্ষ উপলব্ধি করিতে পারা যায়।

আমরা অনেক সময়ে ওলাউঠার পর যে বিকার ইত্যাদি অবস্থা দেখিতে পাই, অতিরিক্ত ঔষধ প্রয়োগই তাহার মূল বলিয়া আমাদের বিশ্বাস। এলোপ্যাথিক ঔষধে তো ভয়ানক বৃদ্ধি প্রকাশ পাইয়া থাকে, তাহা সুন্দররূপে উপলব্ধি করা যায়, কিন্তু হোমিওপ্যাথিক ঔষধের অপব্যবহারেও অপকার হইতে দেখা যায়। এরূপ স্থলে আস্তে আস্তে অপকার ঘটে, বলিয়া অনেকে বৃষ্টিতে পারেন না, যে হোমিওপ্যাথিক ঔষধ অধিক পরিমাণ ব্যবহারেই ইহা ঘটিতেছে। কিন্তু ষাঁহার ধীর চিন্তে, মন নিবেশ পূরক পরীক্ষা করেন তাহার। ইহা বেশ বৃষ্টিতে পারেন। হানিমান তো এবিষয় স্থির সিদ্ধান্তই করিয়া গিয়াছেন তাহার পরবর্তী চিকিৎসকদিগের মধ্যে ডাক্তার হেরিং, লিপি, এলেন, বনিংহাম, ডজ্‌ভিয়ন, হিউজ, বোরল এবং আমাদের দেশের ডাক্তার সরকার এবং ভার্ভী ইহা বেশ বৃষ্টিয়া গিয়াছেন।

আমাদের দেশে আজ কাল ঔষধ প্রয়োগ সম্বন্ধে বড়ই দোষ দেখা বাইতেছে। কোন কোন হোমিওপ্যাথিক চিকিৎসক এত অধিক মাত্রার ঔষধ প্রয়োগ করেন যে তাহাতে ক্ষপকার ঘটিয়া থাকে। আমি একজন চিকিৎসকের সঙ্গে একটী রোগী দেখিতে বাই। সেই ডাক্তার তাহাকে সকালে একটী বৈকালে একটী এবং রাত্রিকালে শয়নের সময় একটী ঔষধ ব্যবহা করেন। এই প্রত্যেক ঔষধ আবার দুই তিনবার করিয়া দিতে উপদেশ দেন, পরে লাগাইবার দুই ঔষধ দেন। আমি দেখিয়া অবাক হইলাম। জিজ্ঞাসা করিলে সেই চিকিৎসক প্রবল প্রকাশ করিলেন, এরূপ না করিলে রোগীরা সন্তুষ্ট হইবেন না। আমি

তাহাকে বলিলাম রোগীরা তো রোগ মুক্ত হইতে চায়, তাহা করিতে ডাক্তারের একটা ঔষধ দিলে যদি হয় তবে বেশী ঔষধ চাহিবে কেন ? আমরা যদি একটা ঔষধে উপকার করিতে পারি তবে বহু ঔষধের প্রয়োগের আবশ্যকতা কি ? আমার বিশ্বাস যে এই সমুদায় চিকিৎসকদিগের ঔষধের জ্ঞান নাই অথবা ঔষধের উপর নির্ভর করিবার শক্তি নাই তাহাতেই এইরূপ অবস্থা ঘটিয়া থাকে ।

সৌভাগ্যের বিষয় আমাদের দেশের অনেক লোকেই এখন বুঝিয়াছেন যে হোমিওপ্যাথিক চিকিৎসকেরা একটীর বেশী ঔষধ এক কালে দেয় না, এবং বার বার অধিক মাত্রার ঔষধও প্রয়োগ করেন না । ইহাতে অনেক উপকার হইয়াছে । আমাদের কোন বন্ধু বলিয়াছেন যে এইরূপ করিয়া যদি চারি-পাঁচটা ঔষধ এক সময়ে ব্যবহার করিতে হয়, তবে আর হোমিওপ্যাথিক ডাক্তারের আশ্রয় গ্রহণ করিবার আবশ্যকতা কি ? তাহা হইলে এলোপ্যাথিক ডাক্তারের নিকটে গেলেই তো সে অভিপ্রায় সিদ্ধ হইতে পারে ।

অতএব আমরা আমাদের বতের চিকিৎসকদিগকে অনুরোধ করি যে তাহারা যেন মহাত্মা হানিমান প্রদর্শিত পথের অনুসরণ করেন ।

হোমিওপ্যাথি বিজ্ঞান ।

শিরক—আইসোপ্যাথিক চিকিৎসার বিপদের আশঙ্কা আছে তাহা বুঝিলা, ইহা তির আর কিছুই বুঝিলা না ?

শিষ্য—হোমিওপ্যাথিক চিকিৎসাই যে প্রাকৃতিক পন্থার চিকিৎসা তাহা বুঝিলাম । কিন্তু পীড়ার নাম দিয়া চিকিৎসা করিতে তাহার সম্পূর্ণ অমত কেন ? আমাদের আদিগুরু মহাত্মা হানিমান বলেন যে :—

“Nomenclature of pathological names is absolutely unnecessary. Is it justifiable to base medical treatment on mere names ?” (অর্থাৎ শারীর স্থানানুযায়ী পীড়ার নামকরণ নিতান্ত অনাবশ্যক । কেবল মাত্র পীড়ার নামের উপর চিকিৎসার ভিত্তি স্থাপন করা কি উচিত ?)

পীড়ার নানাবিধায় চিকিৎসা না করিলে কি প্রকারে চিকিৎসা চলিতে পারে ?

শিক্ষক—পীড়া বলিতে অস্থি ব্যাধি, অস্থি রোগী বোধ করে, ডাক্তার নহে। রোগী বলিতেছে যে, “আমার বক্ষস্থলের মধ্যে সূচবিক্রম বেদনা বোধ করিতেছি, চিং হইয়া শয়ন করিতে পারিতেছি না, ঘন ঘন কষ্টকর কাশ হইতেছে।” ডাক্তার বলিলেন “তোমার ব্রনকাইটিস হইয়াছে।” রোগী ব্রনকাইটিস বলে কাহাকে তাহা জানে না। এখন এই রোগীর, জন্ম একরূপ একটা ঔষধ নির্ধারণ করিতে হইবে যে রোগীর সূচবিক্রম দ্বারা বেদনা নিবৃত্তি হইয়া চিং হইয়া শয়ন করিতে পারে।

শিষ্য—ব্রনকাইটিস পীড়ার অর্থ কি ?

শিক্ষক—স্বাস্থ্যের মধ্যে যে সমুদায় বায়ুনলী বা চুলী আছে, যাহাদের মধ্য দিয়া বায়ু আসা যাওয়া করে, সেই নলী গুলির নাম বায়ুনলী। ঐ নলীগুলির প্রদাহ হইলেই তাহাকে শারীরতত্ত্ববিদ পণ্ডিতেরা বায়ুনলীভূজ প্রদাহ অর্থাৎ ব্রনকাইটিস বলিয়া থাকেন।

শিষ্য—বাহির হইতে তাহাতো দেখা যাইতে পারে না, তাহারা তাহা কি প্রকারে বুঝিতে পারেন ?

শিক্ষক—স্টেথোস্কোপ যন্ত্র বক্ষস্থলে বসাইলে যে শব্দ হয়, তাহা এবং অস্বলীভাৱা টোকা (By auscultation and precussion) ইত্যাদিতে অনুমান করেন যে রোগীর ব্রনকাইটিস হইয়াছে। এই অনুমানের উপর নির্ভর করিয়াই ঔষধ প্রয়োগ করেন।

শিষ্য—ব্রনকাইটিস পীড়া লক্ষণানুযায়ী ঔষধ প্রয়োগ করিয়া আশ্রয় করিবার জন্ম হোমিওপ্যাথদের দ্বারা প্রকৃতি-ঔষধটা বাহির করিবার তাহাদের কোন উপায় আছে কি ?

শিক্ষক—না, স্তম্ভ শরীরে তাহারা কোন ঔষধ সেবন করিয়া পরীক্ষা করিয়া দেখেন না, কাজেই যে কোন ঔষধই হউক না কেন তাহারা অনুমানের উপর নির্ভর করিয়া প্রয়োগ করেন।

শিষ্য—এ কি! এক দিকে জীবন আর এক দিকে মৃত্যু একরূপ বিষয়ে অনুমান! মহাত্মা হানিমান বলিয়াছেন যে আত্মমানিক কোন বিষয়

হোমিওপ্যাথিক ঔষধ্যভাষ্যে স্থান পাইবে না। অর্গানব্রের উপক্রমণিকায়
এরূপও বলিয়াছেন, পীড়াজনিত হানীর অপচরকে (বিধান বিকার—
Physiological lesion) বিপরীত মতাবলম্বীরা পীড়া নাম দেন। ব্রনকাইটিস
ইত্যাদি পীড়াও তবে কি ঠিক তাই?

শিক্ষক—তার আর সন্দেহ কি, নিকোথেরাই পীড়ার নাম দিয়া চিকিৎসা
করে, এবং তদনুযায়ী আত্মমানিক ঔষধ প্রয়োগ করিয়া থাকে।

শিষ্য—আচ্ছা, আমাদের হাতে যদি কোন ব্রনকাইটিসের রোগী আইসে
তাহা হইলে কি করিব?

শিক্ষক—ভাল আর কি, তোমার বেশ শিক্ষা হইয়াছে, আবার পীড়ার
নামানুযায়ী চিকিৎসা করিতে চাও?

শিষ্য—তবে কি করিতে হইবে?

শিক্ষক—রোগী যে তোমাকে বলিয়াছে যে সে তাহার বক্ষের মধ্যে
সুচবিদ্ধবৎ বেদনা বোধ ক্রুরে, চিৎ হইয়া শয়ন করিতে পারে না। জিজ্ঞাসা
কর আর কি উপসর্গ আছে। সে হয়ত বলিবে যে তাহার কাশ, জ্বর, শীত,
পিপাসা এবং বর্ষ ইত্যাদি হইয়া থাকে। রোগী তাহার কথা বলিয়া শেষ
করিলে পর জিজ্ঞাসা করিতে থাক যে কোন অবস্থায় বা কোন সময় কাশ বৃদ্ধি
পায়? কাশের সহিত রক্তের ছিট আছে কি না? শীত কোথা হইতে
আরম্ভ হয়? কোন অবস্থায় পিপাসা ইত্যাদি জিজ্ঞাসা করিয়া লও, এবং
অধিকাংশ লক্ষণ তোমার যে ঔষধের সহিত মিলিয়া যায় সেই ঔষধটি প্রয়োগ
কর। তোমার রোগী যদি বলে “আমাকে কোন ঔষধ দিবেন না আমি কল্য
অনুক সময় নিশ্চয় মরিব, হায়, আমার কি হইবে, আর কয়েকদিন পর মরিলে
সংসারের একটা বন্দবস্ত করিয়া দাইতে পারিতাম, তাহা হইল না।” এই
কথাগুলি যদি অত্যন্ত ভীতির ভাবের সহিত বলে, তবে হুই মাত্রা একোনাইট
দিলেই তোমার রোগী নিশ্চয় আরোগ্যলাভ করিবে।

শিষ্য—অত্যন্ত লক্ষণ ছাড়িয়া দিয়া কেবল নিররেক্ষ লক্ষণের উপর নির্ভর
করিয়া ঔষধ প্রয়োগ করিলেই আরাম হইবে?

শিক্ষক—নিশ্চয়ই আরাম হইবে, কারণ নিররেক্ষ লক্ষণগুলি একোনাইটের
সর্বোৎকৃষ্ট মানসিক লক্ষণ (২২২ সূত্র দেখ)।

শিষ্য—পীড়ার নাম দিয়া চিকিৎসা করা কেবল বধা পাণ্ডিত্য প্রকাশ মাত্র ।

শিক্ষক—হোমিওপ্যাথিক চিকিৎসায় পাণ্ডিত্যের লেশমাত্রও নাই, কেবল লক্ষণ সমষ্টি সংগ্রহের মধ্যে যে কিছু পাণ্ডিত্য ।

শিষ্য—লক্ষণ সমষ্টি সংগ্রহ করার মধ্যে আবার কি পাণ্ডিত্য আছে ?

শিক্ষক—তুমি জান, রোগীকে প্রশ্ন জিজ্ঞাসা করিয়া লক্ষণ সমষ্টি সংগ্রহ করিতে হয় । প্রশ্ন দুই প্রকার, সাধারণ প্রশ্ন এবং নির্দিষ্ট প্রশ্ন (Leading question) । নির্দিষ্ট প্রশ্নদ্বারা যে উত্তর আদায় হয়, তাহার রোগী কখনই আরোগ্যলাভ করিতে পারে না (৮৩—৯৯ সূত্র পর্যালোচনা দেখ) ।

শিষ্য—নির্দিষ্ট প্রশ্ন দৃষ্টান্ত দ্বারা বুঝাইয়া দিন ।

শিক্ষক—মনে কর তোমার কোন একটা রোগীকে প্রশ্ন জিজ্ঞাসা করিতেছে যে তোমার উদরের কোন স্থানে কিরূপ বোধ কর ? রোগী তাহার হস্ত দ্বারা উদরের যে স্থানে বৈকল্পিক বোধ করে ঠিক 'সেক্ষেপ' বলিতেছে, এবং তোমার অন্তরনার্থপুস্তকে তাহার উত্তরগুলি লিখিতেছে, এমন সময় এরূপ কোন প্রশ্ন জিজ্ঞাসা করিতে পার না, যে তোমার যকৃতের (Liver) স্থানে বিন্ বিন্ করিয়া বেদনা করে কি না ? তখন রোগী হয়ত কোন একটা কিছু বলিয়া বাইতে পারে । তোমার রোগীর শারীরস্থান (Anatomy) জানা নাই । তোমার লিভরের স্থানে বিন্ বিন্ করিয়া বেদনা করে কিনা এটি চিকিৎসকের কাল্পনিক প্রশ্ন । তুমি তোমার রোগীকে এরূপ প্রশ্ন দ্বারা বঞ্চে কৃত, প্রেত দেখ কি না ? মুখে টক আনন্দ বোধ হয় ? পাঁতলা জলবৎ মল ত্যাগ কর, ইত্যাদি কাল্পনিক প্রশ্ন জিজ্ঞাসা করিও না । মনে কর তোমার রোগী বলিয়া গেল উদরে বেদনা বোধ করে । তখন জিজ্ঞাসা করিতে পার, উদরের ঠিক কোন স্থানে বেদনা অনুভূতি নির্দেশ করিয়া দেখাও, কি প্রকারের বেদনা প্রোধ কর ? কোন সময় ? কতক্ষণ স্থায়ী ? এক স্থানেই থাকে না অন্তস্থানে চলিয়া যায় ? লাগ্নীক বেদনা না থাকিয়া থাকিয়া ? কিসে উপশম বোধ কর ? কিসে বৃদ্ধি বোধ কর, ইত্যাদি ।

শিষ্য—এইরূপ প্রশ্ন দ্বারা যে লক্ষণ সমষ্টি আদায় হইবে তাহারাই রোগী আরোগ্যলাভ করিবে ?

শিক্ষক—রোগী কোন ধাতুর ও প্রকৃতির লোক (Disposition) তাহাও জানিতে হইবে।

শিষ্য—রোগীর ধাতু আবার কি প্রকারে ঠিক করিতে হয়? রোগী উগ্র প্রকৃতির কি মৃদু প্রকৃতির লোক তাহা যেন সহজেই ঠিক হয়।

শিক্ষক—রোগীর ধাতু ঠিক করা কঠিন বটে। মহাত্মা হানিম্যানের প্রাচীন পীড়ার গ্রন্থ পাঠ না করিলে ঠিক করা সোজা নহে।

শিষ্য—ইংরাজী ভাষাভিজ্ঞ তবে তাহা কি প্রকারে জানিতে পারিবে?

শিক্ষক—কেন, অনেক মৌনিক গ্রন্থ যেমন অর্গাননের বঙ্গানুবাদ সদৃশ আয়ুর্বেদ বিজ্ঞান সূত্র এবং হোমিওপ্যাথিক মতে প্রাচীন পীড়ার চিকিৎসা অর্থাৎ সদৃশ আয়ুর্বেদ বিজ্ঞান সহজেই ধাতু ঠিক সহজেই করা যাইতে পারে।

শিষ্য—মহাত্মা হানিম্যান কি প্রকারে লক্ষণ সমষ্টি আদায় করিয়া ঔষধ ব্যবস্থাকরিতেন তাহা একটা দৃষ্টান্ত দ্বারা বুঝাইয়া দেন।

ক্রমশঃ

শ্রীনীলাধর হই। শিরাজগঞ্জ (পাবনা)।

স্ত্রী-চিকিৎসা।

গর্ভস্রাব।

প্রায় শতকরা ১০টা গর্ভিনীর গর্ভস্রাব হয়। গর্ভস্রাবের কারণ অনেক প্রকার :—গর্ভহ্রুণের পীড়া বা গর্ভমধ্যে মৃত্যু; মাতা বা পিতার উপদংশ এবং তজ্জাত শিশুর ঐ দোষ প্রাপ্তি (ইহা হেতু অধিকাংশ গর্ভস্রাব হয়); মাতার কোন প্রকার সাংঘাতিক পীড়া, যথা বিসৃচিকা, আমাশয়, জ্বর, কোন প্রকার আভ্যন্তরিক যন্ত্রের প্রদাহ ইত্যাদি; ভয় বোধ প্রভৃতি মানসিক পীড়া; জরায়ুর বিভিন্ন প্রকার পীড়া; আঘাত ইত্যাদি। কাহার কাহারও অভ্যাসগত গর্ভস্রাব হয়।

প্রথম ২৩ মাসের মধ্যে হইলে গর্ভস্রাব কি গর্ভস্রাব নির্ণয় করা কঠিন

হয় ; কোমরে সামান্য বেদনা এবং তলপেটে ক্ৰ্ণ ক্ৰ্ণ করিয়া রক্তস্রাব হইয়া, তরল ও চাপ চাপ রক্তস্রাব হয় ; একটা রক্তের ডেলার সঙ্গে ক্র্ণ আবদ্ধ থাকে ; বিশেষ লক্ষ্য না রাখিলে ক্র্ণ এড়াইয়া যায় ও তৎসঙ্গে ফুল ও বাহির হইয়া যায় ।

গর্ভ সঞ্চারের ৫৬ মাস পূরে হইলে প্রসবের রীতিমত লক্ষণ হয় ; প্রথমে কোমরে ও তলপেটে বেদনা, পরে কোঁৎপাড়া বেদনা এবং রক্তস্রাবের আরম্ভ ; বেদনা রীতিমত প্রসবের স্রাব হইতে আরম্ভ হয় ; প্রতিবার বেদনায় রক্তস্রাব বাড়ে ; যোনি পরীক্ষা করিলে জরায়ু ছিদ্রের বিস্তৃতি দেখিতে পাওয়া যায় ; শেষে ঘন ঘন বেদনা হইয়া জল ভাঙ্গিয়া যায় এবং রীতিমত প্রসবের স্রাব ক্র্ণ ও পরে ফুল বাহির হয় ।

প্রথম তিন মাসের মধ্যে হইলে ফুলের থাকায় ছোট থাকায়, এককালীন ফুল ও ক্র্ণ বাহির হয় ; গর্ভ সঞ্চারের শেষ ভাগে হইলে রীতিমত প্রসবের স্রাব ক্র্ণ বাহির হয় । ৪৫ মাসে গর্ভস্রাবে বিপদ আছে ; এই কালে জরায়ুর আয়তন বিশেষ বাড়ে না, সুতরাং জরায়ু সঙ্কোচনে ফুল সহজে ছেঁড়ে না ; ফুল সঙ্গে সঙ্গে বা অব্যবহিত পরে বাহির হইয়া না আসিলে জরায়ু ছিদ্রের রোধ হয় এবং ফুল জরায়ু মধ্যে আটকাইয়া থাকে । এখন মধ্যে মধ্যে রক্তস্রাব হইতে আরম্ভ হয় ; এই রক্তস্রাব অতিরিক্ত হইতে পারে ; অধিক রক্তস্রাব হইয়া ২৪ দিন পরে ফুল বাহির হইতে পারে । অথবা জরায়ু মধ্যে ফুল পুচিয়া থগুশঃ বাহির হইতে পারে ; ফুল পচিলে প্রসূতির রক্তের দূষণ হইয়া অল্প পীড়ার তাহার মৃত্যু হইতে পারে ।

গর্ভগীর তলপেটে ও বস্ত্রমধ্যে ভারবোধ, কোঁৎপাড়া বেদনা, কোমরে বেদনা ও ক্র্ণ এবং রক্তমস্রাব দেখা দিলে, গর্ভস্রাবের লক্ষণ দৃষ্ট হইতেছে বুঝিতে হইবে । যতক্ষণ পানমুচি না ভাঙ্গে, ততক্ষণ স্রাব নিষ্কারণের জন্য স্বেচ্ছা করিতে হইবে ; জল ভাঙ্গিয়া যাউলে চেষ্টা করা যথা, তখন যত শীঘ্র ক্র্ণ নিষ্কাশিত হয় ততই ভাল ।

গর্ভসঞ্চারের শেষ ভাগে গর্ভস্রাব নির্ণয় করা কঠিন হয় না ; প্রথম ২৩ মাসে কষ্টমস্রাব হইতে ইহার প্রভেদ করা কঠিন । নিয়ে তাহাদিগের প্রভেদ লিখিত হইল ।

গর্ভশ্রাব ।

রজঃ কৃচ্ছ্ৰ ।

১। জরায়ুর মুখ খোলা ।

১। জরায়ুর মুখ বন্ধ ।

২। বেদনার পূর্বে রক্তশ্রাব ।

২। রক্তশ্রাবের পূর্বে বেদনা ।

৩। রক্তশ্রাবে বেদনার কোন

৩। রক্তশ্রাবে বেদনার সম্পূর্ণ

প্রকার পরিবর্তন হয় না ।

লোপ বা বিশেষরূপে হ্রাস ।

ভাবী ফল :—অনেক সময়ে প্রসূতির মৃত্যু সাধিত হয় । ফুলের কোন অংশ থাকিলে মধ্যে মধ্যে বা নিহত রক্তশ্রাব হইয়া প্রসূতির নানা প্রকার বিপদ হয় । গর্ভশ্রাব হেতু জরায়ুর নানা প্রকার পীড়া হয় । একবার গর্ভশ্রাব হইলে, উহা ক্রমশঃ অভ্যাসগত হইয়াছে সম্ভাবনা । আপনা হইতে গর্ভশ্রাব করাইয়া অনেকের ধনুষ্ঠকার হইয়া মৃত্যু হইয়াছে ।

চিকিৎসা :—এই পীড়ার চিকিৎসায় নিম্ন বিষয়ে লক্ষ্য রাখিতে হইবে ।

(ক) গর্ভশ্রাব অভ্যাসগত হইলে সেই অভ্যাসের বিচরণ । (খ) উপদংশ বা অন্য কোন প্রকার রক্তের দূষণ বা ধাতুগত কোন দোষ হেতু গর্ভশ্রাব হইলে তাহার দূর করা ; (গ) গর্ভশ্রাবের লক্ষণ উদ্ভূতির প্রথম প্রথম আহত হইলে গর্ভশ্রাবের নিবারণ ; (ঘ) গর্ভশ্রাব অনিবার্য হইলে ক্রণের নিষ্কাশনের পর সঙ্গে সঙ্গে ফুলের বহিকরণ ; (ঙ) মানসিক উত্তেজনা, শোক প্রভৃতি কারণে গর্ভশ্রাব হইলে, প্রসূতিকে শোয়াইয়া রাখা ও স্থির রাখা, কোন প্রকার মানসিক উত্তেজনা হইতে না দেওয়া ইত্যাদি ।

পূর্বে লিখিত হইয়াছে, গর্ভশ্রাবের পর জরায়ু মধ্যে ফুল আটকাইয়া থাকিলে প্রসূতির নানা প্রকার বিপদ হইবার সম্ভাবনা । আপনা হইতে ফুল বাহির না হইলে, যাত্ৰিক উপায় অবলম্বন করিয়া তৎকার্য সাধন করিতে হইবে । এটা ষাণ্ঠবিদ্যা চিকিৎসকের কার্য, সুতরাং এখানে লিখিত হইল না ।

গর্ভসঞ্চারের প্রথম প্রথম উহা নষ্ট হইলে কখন কখন ফুল বা পর্দার ২।৩ খণ্ড জরায়ু মধ্যে থাকিতে পারে এবং থাকিলে অল্প বা অধিক পরিমাণে রক্তশ্রাব হইয়া থাকে । এরূপ স্থলে চায়না ব্যবহারে বিশেষ ফল পাওয়া গিয়াছে ।

ষষ্ঠীর বা তৃতীয় মাসে গর্ভশ্রাবে—কেলি কার্কস্নিকম্ ; তৃতীয় মাসে—সুবাইনম্ ; পঞ্চম হইতে সপ্তম মাসে—সিপিয়া ।

উপদংশ পীড়া, কারণ হইলে তাহার চিকিৎসা ; শ্লেষ্মাপ্রধান, ধাতুতে ক্যাস্ক-কা ; অভ্যঙ্গগত গর্ভশ্রাবে আলোট্-কা, সিমিসিক্‌য়ুগা ।

এপিস্ :—এক বা উভয় কুঁচকিতে রিঁরি করিয়া উঠে এবং রক্তশ্রাব বা গর্ভশ্রাব আনিয়া কেলে, প্রস্রাবের অতি স্বল্পতা ; তৃষ্ণার অভাব । ২০০ক্রম ব্যবহার্য্য ।

অর্ণিকা :—আঘাত হেতু গর্ভশ্রাব লক্ষণ দৃষ্ট হইলে ; বেদনা সহ বা তদ্বিহীন রক্তশ্রাব আরম্ভ হইলেই, অথবা শ্রাব না হইয়া বেদনা আরম্ভ হইলেই, ইহার ব্যবহার কর্তব্য । সর্ষ শরীরে থেংলান বোধ ; জ্বরের নড়াচড়ার অভ্যন্ত লাঘব ; ভ্রণ গর্ভ মধ্যে আড়ভাবে রহিয়াছে বোধ হইয়া ।

কাকেরিয়া কার্কস্নিকা :—শ্লেষ্মাপ্রধান ধাতু, প্রথম চতুর্থেই প্রতিবার অধিক পরিমাণে ও অধিককাল স্থায়ী রক্তশ্রাব, চরণ সর্বদা ঠাণ্ডা ; মাথা ঘোরা ।

ক্রোকাস্ :—রক্তশ্রাবে, রক্ত কাল স্ততার স্তায় লম্বা হইয়া পড়ে ।

ইপেকাক :—সর্বদা গা বমি ও উজ্জল লাল রক্তশ্রাব ।

কেলি কার্কস্নিকম্ :—প্রসবের স্থায় বেদনা কোমরে উঠিয়া উরু বহিয়া নামে ; অথবা ছুঁচ বেঁধার স্থায় বেদনা । চলিতে কোমরে ব্যথা ; তজ্জন্য বসিয়া বা শুইয়া পড়িতে ইচ্ছা । কোষ্ঠবদ্ধ, বৃহদায়তনের মলের অতি কষ্টে নিঃসরণ ; চক্ষুর উপর পাতার ফোলা ।

সেবাইনা :—১মূঠ হইতে উদরের সমুখ পর্য্যন্ত বেদনার গতি ; অতিরিক্ত শ্রাব ; শ্রাবে রক্তের ভোলাব ও তরল রক্তের সমান পরিমাণে থাকি কালার বা লাল রক্ত ।

সিপিয়া :—মলদ্বারে ভারবোধ ; কোষ্ঠবদ্ধ, আমিশ্রিত মল ; অভ্যন্ত বেগ ও কৌৎপাড়া, প্রায়ই তাহা নিষ্ফল । প্রায়ই উত্তাপের স্লক ; জ্বরের নড়া চড়া বড় বোধ করিতে পায়ার যায় না ; ঘোনি দ্বারে অভ্যন্ত চুল্কান ; মোহ প্রবণতা ; পাকস্থলী প্রদেশে কষ্টকর শূন্যতা বোধ । মলদ্বারে গোলকের স্থায় ভারবোধ একটা প্রধান লক্ষণ ।

সিমিসিফুগা ও তাইবর্ণম ব্যবহারে অনেক সময়ে বিশেষ ফল পাওয়া যায়।

শ্রীবিপিন বিহারী মৈত্র, এম, বি।

রোগী সমাচার।

১। বাবু বহুবাহারী সেনের পুত্র, বয়স্ক্রম ১০ বৎসর। শরীর ক্লান্ত কিন্তু সুস্থ ছিল। বিগত ১৩০৯ সালের জ্যৈষ্ঠ মাসে সর্দি লাগিয়া ভয়ানক কাশি হয়। তাহাতে কোন ঔষধাদি ব্যবহার করা হয় না। কাশি ক্রমে বৃদ্ধিপ্রাপ্ত হয়, ক্রমে যকৃতের স্থানে বেদনা হইয়া পাণ্ডু বা জন্ডিস উপস্থিত হয়।

নানাপ্রকার ঔষধ সেবনে কোন উপকার দর্শে না। পরে ৩০এ জ্যৈষ্ঠ তারিখে আমার বাড়িতে রোগীকে লইয়া আসেন। দান্ত রীতিমত খোলাসা হয় না, কাশি প্রাতঃকালে ও সন্ধ্যার সময় বৃদ্ধি পায়, অনেক কাশিয়া অন্ন গয়ার উঠে। দান্তের রং সাদা, আমি তাহাকে নস্কভমিকা ৩০ ডাইলিউসন সকালে একবার ও বৈকালে একবার খাইতে দিলাম। চারিদিন ঔষধ খাওয়া হইল কিন্তু তাহাতে কোন উপকার হইল না। বরং রোগীর যকৃতের স্থানের বেদনা বৃদ্ধি হইল।

পরে চেলিডোনিয়ম ৫৫ ডাইলিউসন আটটি পুরিয়া দিয়া, সকালে ও বৈকালে এক একটা করিয়া খাইতে দিলাম।

এবার চারি দিনে বিশেষ উপকার দর্শিল। যকৃতের বেদনা তো একেবারেই সারিয়া গেল, অধিকন্তু কাশিও অনেক কমিয়া গেল।

ঔষধ বন্ধ দিলাম, তিন চারি দিন রোগী বেশ ভাল রহিলেন, চক্ষু হরিদ্রা ভাবটী একেবারে কাটিয়া গেল ও পরিষ্কার হইয়া উঠিল। আরও তিন দিন ঔষধ দিলাম না।

কাশিটা নরম হইল বটে কিন্তু একেবারে গেল না; প্রাতঃকালেই কাশি হইত এবং অনেক পরিমাণে শ্লেষ্মা বাহির হইত। এন্টিমোনিয়ম টার্ট ৬ ডাই-

লিউশন তিনবার করিয়া দিলাম, তাহাতে উপকার হইল না দেখিয়া আশিষ্য
৩০ ডাইলিউশন একবার করিয়া দুই দিন দিলাম, রোগী আরোগ্য হইয়া
গেল ।

২। একটা সুবতী বক্রকৃম অস্থান ২৫ বৎসর, শরীর খুব সবল ও উত্তম
গঠন যুক্ত । রোগ প্রায়ই হইত না ।

গত বৎসর শ্রাবণ মাসে ভয়ানক গরমীর পীড়া দ্বারা আক্রান্ত হইয়া উঠে ।
অস্থিসন্ধান করিয়া জানিলাম স্বামীর উপদংশ ক্ষত হয়, সেই অবস্থায় স্ত্রী সহ-
বাস করিয়া তাহাকে ও এই রোগে আক্রান্ত করিয়াছে ।

রোগীর জননেত্রির মুখের দুই দিকে দুই খানি ক্ষুদ্র ক্ষত দৃষ্ট হইল এবং
অভ্যন্তরে একখানা বড় ঘা দেখা গেল । বাহিরের ঘা দুই খানি পরিষ্কার লাল-
বর্ণ কিন্তু মধ্যের ঘায়ে দাদা ময়লা জমিয়া অপরিষ্কার রহিয়াছে । মূত্র ত্যাগে
বাহিরে বড় আলা হয়, কলতানি যন্ত্র ও জলের মত পদার্থ ভিতর হইতে নির্গত
হইতে থাকে। যোনীকবাটদ্বয় ফুলিয়া আছে ।

রোগীর প্রত্যহ সন্ধ্যার সময় অরভাব হয়, রাত্রি দুই প্রহর পর্য্যন্ত জ্বরের
প্রকোপ থাকে, গাত্রদাহ, পিপাসা, নিদ্রার ব্যাঘাত, স্বপ্ন ইত্যাদি লক্ষণ প্রকাশ
পায় । কিছুই খাইতে চায় না এবং গাত্র বেদনার জন্ত কেবল শুইয়া থাকিতে
চায় ।

আমি তাহাকে মার্কিউরিয়স সল ৬ষ্ঠ ডাইলিউশন দুইবার করিয়া খাইতে
দিলাম, তিন দিন ঔষধ খাইয়া ঘা বাড়িয়া গেল এবং স্বস্তির বৃদ্ধি হইল । ঔষধ
খাইতে দিতে লাগিলাম ।

ছয় দিন ঔষধ খাওয়ার পর রোগী দেখিতে গেলাম, সব দিকেই উপকার
হইয়াছে । অর বন্ধ হইয়াছে এবং ক্ষত স্থান পরিষ্কার হইয়া ফুলাও কমিয়া
গিয়াছে । দেখিয়া মার্কসল আবার দিলাম ।

ক্রমেই উন্নতি হইতে থাকিল । দুই সপ্তাহ ঔষধ খাইয়াই এক সপ্তাহ
ঔষধ বন্ধ দিলাম, রোগী প্রায় আরোগ্য হইয়া উঠিল । মধ্যে মধ্যে দুই এক
মাত্রা ঐ ঔষধ দিতে লাগিলাম । এক মাসে রোগী সম্পূর্ণ আরাম হইয়া
উঠিল । শরীর ভাল হইতে ছয় মাস লাগিয়াছিল, অল্প ঔষধ আর কোনরূপ
দেওয়া হয় নাই ।

৩ বাবু—দত্ত। বয়স্কম ৩৫ বৎসর। স্নায়ু ও সবলকার, প্রায়ই কোন রোগ হয় না। মস্তপান অভ্যাস ছিল, বলিলেন এখন ছাড়িয়া দিয়াছেন। কখন উপদংশ বা প্রমেহ রোগ ইত্যাদি হয় নাই।

বিগত ১৯০৩ সালের এপ্রিল মাসে এক দিন আমাদের বাড়ীতে আসিয়া বলিলেন, অনেক দিন হইতে প্রস্রাব জ্বালা হয় এবং বার বার অল্প পরিমাণে প্রস্রাব হইতে থাকে। সূত্র ত্যাগের সময় হইতে শেষ পর্য্যন্ত জ্বালা হয়, মূত্র লাল কিন্তু কোন প্রমেহ ইত্যাদি পদার্থ দেখা যায় না। গাত্রে বেদনা থাকে বিশেষতঃ পশ্চাৎভাগে বেদনা অধিক।

আমার প্রমেহ সন্দেহ হইল কিন্তু রোগী সমস্ত অস্বীকার করিলেন। আমি তাঁহাকে প্রথমে বাবিরিস্ ৬ষ্ঠ ডাইলিউসন, প্রত্যহ এক মাত্রা করিয়া চারিদিন দিলাম। রোগী বলিলেন বাতের বেদনা অনেক কমিয়াছে বটে কিন্তু প্রস্রাব বেক্রপ হইতেছিল সেইরূপই আছে এবং জ্বালাও নিবারণ হয় নাই।

আমি ক্রমে ক্যান্সারিস, নক্সভমিকা, মার্কিউরিস, প্রভৃতি ঔষধ দিলাম কোনই উপকার হইল না, পরে প্রমেহ বন্ধ হওয়া সন্দেহে আমি মেটরিগম ২০০ ডাইলিউসন একমাত্রা দিলাম, দুই দিন পরে সংবাদ দিতে বলিলাম।

রোগী আসিয়া আমাকে বলিলেন মহাশয়, আপনি আমার সর্বনাশ করিয়াছেন, গগরিয়া দেখা দিয়াছে। পুঁষ পড়িতেছে এবং জ্বালা যন্ত্রণা খুব বেশী, অনেক পীড়াপীড়ি করার স্বীকার করিলেন অল্প বয়সে একবার গগরিয়ার মত স্নায়ু হইয়াছিল বটে তাহাতে কিন্তু কোন কষ্ট হয় নাই। টোটকা ঔষধে দুই তিন দিনেই তাহা সারিয়া গিয়াছিল।

আমি সব বুঝিলাম, ঔষধ বন্ধ দেওয়া গেল, এক সপ্তাহে রোগীর অনেক আরাম বোধ হইল, আর এক সপ্তাহে আরোগ্য হইয়া গেল।

কেবল স্নায়ু অফ মিল্কের পুরিয়া দেওয়া যাইত।

৪। বাবু নরেন্দ্র নাথ ঘোষ, বয়স ২৫ বৎসর, শরীর সবল ও দীর্ঘকায়। অল্প প্রকার পীড়া প্রায়ই হয় না, কিছুদিন আহারের অনিয়মে পেটের দোষ দেখা দেয়, যাহা খায় কিছুই হজম হয় না, পেটে প্রকৃত বায়ু সঞ্চিত হইয়া থাকে এবং প্রায়ই পাতলা দান্ত হইতে থাকে।

মলের বর্ণ হরিদ্রা ও কিঞ্চিৎ লাল মিশ্রিত। আহারের পরেই পেট কাঁপিতে

থাকে এমন কি কখন কখন আহারের সময়ও পেট ফাঁপে। দাঁত বেশী হয় ঘটে কিন্তু তাহাতে পেটের কাপ বন্ধ কমে না, তবে রাত্রে কিছু আহার না করিলে বায়ু নিঃসরণ হইয়া উদর ক্ষীতি কম পড়িয়া যায়।

ক্ষুধা কম নহে এবং কাঁচাাদিও রীতিমত করা হইয়া থাকে তাহাতে বিশেষ কোন কষ্ট হয় না, তবে আহারের পরেই নিদ্রালুতা প্রকাশ পায় এবং তাহাতে কষ্ট বোধ হয়, আফিসে যাওয়ার বাধ্যত উপস্থিত হয় এমন কি রাস্তার গাড়ীতেও ঘুম পায়, শরীর অগ্রে যাহা ছিল তদপেক্ষা ক্ষীণ হইয়াছে। রোগী নিজেই নক্সভমিকা, লাইকোপোডিয়ম, পল্‌সেটিলা প্রভৃতি ঔষধ সেবন করিয়াছেন, তাহাতে পীড়ার কোন উপশম হয় নাই।

আমি তাঁহাকে নক্সমাথাটা ওয় ডাইলিউসন ১২ পুরিয়া, এক পুরিয়া সকালে এবং এক পুরিয়া বৈকালে খাইতে দিলাম।

তিন দিনেই রোগীর অবস্থা এত ভাল বোধ হইল যে তিনি জিজ্ঞাসা করিলেন কি ঔষধ দেওয়া হইয়াছে, আমি যখন বলিলাম নক্সমাস্থাটা, তখন আশ্চর্য হইয়া বলিলেন এ ঔষধে যে অপাকে উপকার হয় তাহা জানিতাম না।

আর কিছুদিন ঔষধ খাইয়া রোগী সুস্থ হইয়া উঠিলেন।

শ্রীপ্রতাপচন্দ্র মজুমদার এম, ডি।

বাবু * * মিত্র। রোগীটী একাউন্টেন্টা সুদীর্ঘকাল রোগ যন্ত্রণা ভোগ করিয়া আমার দ্বারা চিকিৎসা করাইবার বাসনায় কলিকাতা হইতে নিয়ন্ত্রিত পত্রখানি পাঠান।

শ্রীচরণ কমলেশু—

আমি একটী মহাপাণের আকর যৌবন সুলভ যত কিছু দোষ ও ব্যাধি হইতে পারে তাহা সমস্তই হইয়াছে এক্ষণে প্রায় ৪৫ বৎসর বয়স্ক হইয়াছে এখনও তাহার কিছু হ্রাস পায় নাই এক্ষণে প্রায় তিন মাস গ্ৰস্ত হইল যেহেতু রোগে আক্রান্ত হইয়াছি। প্রথমে পুঁথ দেওয়া দিয়াছিল কিন্তু কোন প্রতিকার না করার এক প্রকার প্রস্রাব বন্ধ হইবার মত হইয়া সৰু ধারে প্রস্রাব হইত। পরে

কোন ডাক্তারের যত্নগার পিচকারি লইয়াছিলাম, তাহাতে প্রস্রাব সঁরল হইয়াছে কিন্তু প্রস্রাব করিবার ইচ্ছা হইলো বন্ধ খুলিতে দেব্রি সহেনা এবং প্রস্রাব শেষ হইয়া আসিলে উপস্থের ভিতর বড়ই যন্ত্রণা বোধ হয় আর প্রস্রাবও বারে বেশী হইতেছে এবং প্রস্রাব করিবার সময় প্রথমে পুড়ি গোলাবৎ ঘোলা প্রস্রাব হইয়া পরে সহজ প্রস্রাব হয়। এই ব্যাধি হইতে বাহ্যতে ত্বরায় মুক্তি পাই এমন একটা ঔষধ ব্যবস্থা করিয়া, আর ঔষধ সেবনের ও আহাৰাদির বিধি সুমন্ত অনুগ্রহপূর্বক লিখিয়া দিবেন। যন্ত্রণাটা সাহাতে দুই এক দিনের মধ্যে যায় এমনত অনুগ্রহ করিবেন ইতি তাং ৪:২১:০১।

এই পত্রখানি পাইয়া আমি তাঁহাকে প্রাতে এক ফোটা করিয়া ক্যান্ডারিস ৬X ও সন্ধায় এক ফোটা এসিড ফসফরিক ৬X, প্রত্যহ এই দুইটি ঔষধ দুইবার করিয়া চারি দিন সেবনান্তে ঔষধ সেবন বন্ধ রাখিয়া, সংবাদ দিতে লিখিলাম ও সহ্য এবং অভ্যাস মত স্নানাহার করিতেও লিখিলাম। উক্ত চারি দিন ঐ ঔষধ সেবনান্তে ঔষধ সেবন বন্ধ রাখিয়া রোগাটী আমাকে যে পত্রখানি লিখিয়াছেন তাহা হইতে উদ্ধৃত করিয়া কয়েক পংক্তি নিম্নে লিখিলাম। তাহা হইতেই সুবিশেষ জ্ঞাত হইতে পারিবেন।

প্রণামা শতকোটি নিবেদন—

মা জগদম্বার নিকট সতত আমার এই প্রার্থনা ঘেন মা আপনাকে রাজ রাজেশ্বর করেন। আপনার সৃষ্টিকিৎসা ও সুব্যবহার গুণে আমি মহতী পীড়া হইতে চারিদিনেই সম্পূর্ণ আরোগ্যলাভ করিয়াছি। মা আপনার শরীর বল ও ধন সতত রক্ষা করুন। আমার একান্ত এই প্রার্থনা * * * শেষবারেও এই পত্রখানি পাইয়া তাঁহার আর ঔষধ সেবনের প্রয়োজন নাই বলিয়া পত্রের জখাব দিলাম।

ত্ৰীজ্যোতিশচন্দ্র বন্দ্যোপাধ্যায়।

মাহিনগর।

বিজ্ঞান বীর ডাক্তার মহেন্দ্র লাল ।

পরম পিতা পরমেশ্বরের অনির্বচনীয় সৃষ্টি-ব্রহ্ম জীবের বোধগম্য । এই পরিদৃষ্টমান জগৎ মানব সমক্ষে কত বৃহৎ বলিরা প্রতীয়মান হয় । কিন্তু এই বৃহৎ জগৎ সৌর জগতের সহিত একবার তুলনা করিতে কত ক্ষুদ্র, ক্ষুদ্র হইতেও ক্ষুদ্র । এইরূপ কত কত সৌরজগৎ, কত কত নক্ষত্রলোক, কত কত সাগর মহাসাগর অনন্তকাল অনন্তের বঁকে গোলা করিতেছে । ভ্রান্ত মানব একবার দেখ, মহাসাগরে বারিবিন্দু অপেক্ষা, এই অনন্তের লীলাক্ষেত্রে মানব ক্ষুদ্রাদপি কত ক্ষুদ্র । তাহার অস্তিত্ব কতটুকু । ইহসংসারে এই মানবমণ্ডলী দ্বারা স্বাভাবিক নিবাস, পল্লী, নগর, প্রদেশ, দেশ, মহাদেশ গঠিত । ভিন্ন ভিন্ন জাতি প্রচলিত । কোথাও জাতিতে জাতিতে বিধম বৃদ্ধি বিগ্রহে সংঘটিত হইতেছে । একাধাও শাস্তির সুধামর ছারি বিরাজ করিতেছে । কিন্তু এই সংসারে কালগ্রাসী মৃত্যুর সকলের উপরই অধিকার ও আধিপত্য সমান । তাহার কবল হইতে কাহারও রক্ষা নাই । মৃত্যু সকলকেই গ্রাস করে । মানবের মৃত্যুতে তাহা আত্মীয়স্বজন পরিবারবর্গকে বিষেণে জনিত শোকে ব্যথিত করে । তাহার বিরোগে সংসারে জ্ঞাপরের কোম ক্ষতি বৃদ্ধি হয় না । দেশের স্লেহন শুভাশুভ নির্ভর করে না । জগতে কেহ তার সন্ধান লয় না । মানব আসে, যায়, কাল সহ বিলীন হয় । কিন্তু দেশের মঙ্গল, জাতির উন্নতি, সে স্বাধীন মস্তিষ্ক, স্বাধীন বুদ্ধিশীল, স্বাধীন চেতা মহা-মুত্তব স্বদেশ হিতৈষীর উপর নির্ভর করে, স্বাধীন সৃষ্টিশীল মহাত্মার বিরোগ কেবল তাহার পরিজনবর্গের শোকের কারণ নহে । দেশের অন্তত । একটা উজ্জল নক্ষত্রের পতন । তাই আমরা এরূপ ব্যক্তির জন্য অশ্রুপাত করিতেছি । আজ ইংরাজ জিত উন্নত, আমাদের দেশের রাজা । আমরা পরাজিত স্বাধীন সৃষ্টি বিহীন । আমাদের দেশে আজ স্বাধীন সৃষ্টিশীল স্বদেশহিতৈষী ব্যক্তি বিরল । কিন্তু ডাক্তার মহেন্দ্রলাল সরকারে এই সমুদয় সদগুণের সম্পূর্ণ বিকাশ ছিল ।

ডাক্তার মহেন্দ্রলাল সরকার আর ইহলোকে নাই। বিগত ২৩ শে ফেব্রুয়ারী তারিখে প্রাতে ৫-১৫ মিনিট সময় তিনি মর্ত্যধাম ত্যাগ করিয়া স্বর্গলোকে গমন করিয়াছেন। জন্মিলে মরিতে হয়। জীব মাত্রেই মরণশীল। এবং মহাত্মা সরকার ৭০ বৎসর বয়ঃক্রম অতিক্রম করিয়া উপযুক্ত সময়ে স্বর্গারোহণ করিয়াছেন। অতএব তাঁহার জন্ম খেদ নাই, আক্ষেপ নাই। আজ আক্ষেপ দুর্ভাগ্য দেশের জন্ম। আমাদের দেশের এমনই দুর্ভাগ্য যে, সে মহাত্ম্যভব মহাত্মা পরলোক গমন করিতেছেন; আর তাঁহার স্থান পূরণ হইতেছে না। তাই বলি, বুদ্ধি ডাক্তার সরকারের পক্ষেও সেই নিদর্শনের অঙ্গস্বরূপ হয়।

মহাত্মা হানিমান প্রতীচ্য রাজ্যে আবির্ভূত হইয়া যেমন বৈজ্ঞানিক সময়ে তৎসাময়িক প্রতিকূলবর্ত্তি মহারথী বর্গকে পরাজয় করিয়া স্বীয় অস্ত্রাস্ত্র মতের প্রতিষ্ঠা স্থাপন করিতে সমর্থ হইয়াছিলেন; মহাত্মা সরকারও এই হতভাগ্য পদদলিত পরাজিত ভারতবর্ষে অবতীর্ণ হইয়া স্বীয় মস্তিষ্কের প্রাণার্থ্য বলে অনায়াসে বৈজ্ঞানিক সময়ে শত শত প্রতিকূলবর্ত্তী এলোপ্যাথী মতাবলম্বী মহারথীর স্তনিপুন মত সকল খণ্ড বিখণ্ড করিয়া স্বীয় মতের প্রভাও প্রতিষ্ঠা স্থাপন করিতে সমর্থ হইয়াছিলেন। কত কত পাশ্চাত্য মহারথী বৈজ্ঞানিক সময়ে মহাত্মা সরকার কর্তৃক পরাজিত হইয়াছেন। কে বলিতে পারে অবসর বুঝিয়া, বিজ্ঞানকেশরীকে প্রতীত দেখিয়া, সেই সমস্ত প্রতিকূলাচারী মহারথী সকল আজ এতক্ষেপে সহকার বিহীনে হোমিওপ্যাথির টপক খর অস্ত্র বর্ষণ করিবেন না।

যখন স্নেহ মহামারী বিশাল ভারতবর্ষের নানা স্থান স্থানে পরিণত করিতে লাগিল। যখন তৎপ্রতীকারার্থে আমাদের দেশে রাজনিয়োজিত নিরস্ত্র ও প্রথা লোক সমীপে রোগ অপেক্ষা অধিকতর ভীষণ বলিয়া প্রতীত হইতে লাগিল। যখন অপ্রতিহত প্রভাবে রাজ নিয়োজিত সেই সকল প্রথা কঠিন হইতে কঠিনতর হইলেও অবশ্য পালনীয় ও মাননীয় এই মর্মে সকলের জয়গত হইল। মহামারীর প্রশান ছায়া, রাজাজ্ঞার ভীতিছায়া, যখন সুগপৎ লোকের অন্তঃকরণ তমসাহার করিল। ডাক্তার সরকার তৎসমুদয় রাজ অবলম্বিত কঠিন নিয়ম সকল যে সম্পূর্ণ ভ্রম পূর্ণ ও দোষাবহ, স্বীয় লেখনী প্রস্তুত

মৃত্যুবরণ করিতে তাহা দর্শাইতে কিছুমাত্র পরাম্ভুৎ করেন নাই। আজ ডাক্তার সরকারের সহিত তৎসদৃশ দোষাবহ কোন নিয়ম, প্রথা বা মতের প্রতিবাদ : এতদেশে তিরোহিত হইল। তাই বলি আজ হতভাগ্য দেশের পক্ষে বড় দুর্দিন।

পরিণত বয়সে স্বীয় শরীরের অস্বাস্থ্যতা নিবন্ধন ডাক্তার সরকার বহুদিন হইতে রোগীর চিকিৎসা একরূপ ত্যাগ করিয়াছিলেন। কিন্তু তাই বলিয়া তিনি একেবারে নিস্তর ছিলেন না। বর্তমান সময়ে অস্বদেশে প্রাহুত এই প্রোগ মহামারীর প্রস্ত সততই তাহার মন চিন্তাকুল ছিল। এই ভীষণ মহামারীর প্রতিবেদক কি, কি উপায় অবলম্বনে রোগের আক্রমণ হইতে রক্ষা পাওয়া যায়, রোগের প্রাক্কালে কি উপায় অবলম্বনে রোগ আর বৃদ্ধি পায় না, রোগের সম্যক প্রসুত ও পরিণত অবস্থায় কি প্রেরকর এই সমুদয় বিষয় অল্প-ধাবন পরবশ হইয়া তিনি বিজ্ঞান সম্মিলিত মতের উদ্ভারনে একজন অগ্রবর্তী ছিলেন।

ডাক্তার সরকারের কীর্তিকলাপ বিস্তর। তাঁহার কীর্তিস্থলার দেশ পরি-শোভিত। এখন তৎসমুদয় কীর্তন করার অবসর নহে। কলিকাতার বর্ত-মান বিজ্ঞান সমিতি (Science Association) ডাক্তার সরকারের স্বস্থ রোগিত বৃক্ষ। এই তরুর বাগ্যাবস্থায় তিনি ইহলোক ত্যাগ করিলেন। এখন ইহার রক্ষণাবেক্ষণের ভার দেশের লোকের উপর ন্যস্ত হইল। এই তরু বথানিয়মে রক্ষিত ও পরিবর্দ্ধিত হইলে কালে কম বৃক্ষে পরিণত হইয়া অমৃত ফল প্রসব করিবে। কিন্তু জানি না ভাবিতব্যতার কি আছে। অস্ব-দেশে কত কত জ্ঞানালোক উপযুক্ত পুষ্টিপোষক অভাবে নিভুতে নির্কীর্ণ হই-তেছে। আর দেশের কত কত ধন কুবের নরপৈশাচিক ব্রতে ভুরি ভুরি অর্থ নাশ করিতেছেন। যে দেশ এক সময় বিজ্ঞানশাস্ত্রে অগতে অগ্রগণ্য ছিল। সভ্য অগতে সভ্যতা প্রারম্ভের বহুকাল পূর্বে যে দেশ উন্নতি সোপানে অধি-বোধন করিয়া ধ্রুব নক্ষত্রের গতি নির্দেশ করিয়া গিয়াছে, আজ সেই দেশ বিজ্ঞানে শিশু, পশ্চাৎপদবর্তী। অহো! কি বিষম বিষম।

এই সকল সমুদয় আদার স্বাধীন চেতা, স্বদেশ বৎসল ডাক্তার সরকার আর ইহলগতে নাই। সেই জন্য আমরা আজ অশ্রুবর্ষণ করিতেছি। আজ

কলিকাতার শাশান ঘাটে জাহুবী পুলীনে যে ভয় বিধৌত হইল, বহুকাল সে ভয় ভাগীরথী জলে বিধৌত হয় নাট।

শ্রীরাইমোহন বন্দ্যোপাধ্যায়,
চিকিৎসক, লাহিড়ী কোং কলিকাতা।

HINTS.

সর্বমেজলিয়ারী গ্রন্থির প্রদাহ, টিউবার্কিউলার মেনিঞ্জাইটিস, কর্ণে পলিপস, জরায়ু শত্রু হওয়া, পুরাতন কাশি, রাত্রিকালে ও দিবসে কাশির বৃদ্ধি, হেকটিক জ্বর, সর্বক্ষরণ পূর্ববিদিত স্লেয়া উঠা, ক্যান্সার, ক্ষয়কাশি, উদরে বায়ুসঞ্চয়, স্তনেব. আব. মাথাধরা ও অস্থিক্ষয় পীড়াসমূহে ক্যালকেরিয়া আইওডেট বাবজত হইয়া থাকে।

রক্তাক্ততা, পৃষ্ঠদণ্ডে দুর্বলতা, ব্রাইট, পীড়া, পিণ্ডদিগের ওলাউঠা, কোরিয়া, ক্ষয়কাশি, দুর্বলতা, দন্তোদ্যমে কষ্ট, বহুমূত্র, অপাক, গুরুক্ষরণ, অসাড়ে মূত্রত্যাগ, মূগিরোগ, ফিস্চুলা, অস্থিভঙ্গ, প্রমেহ, মাথাধরা, হার্নিয়া, হাইড্রোসিল, শ্বেতপ্রদর, কটিবাত, মূত্রে ফস্ফেট, বাত, কেকটস, মেরুদণ্ডে স্থিভাগ হওয়া, শত্রুগ্রীবা, গর্ভক্ষত ও পলিপস পীড়াসমূহে ক্যালকেরিয়া ক্ষয় বাবজত হয়।

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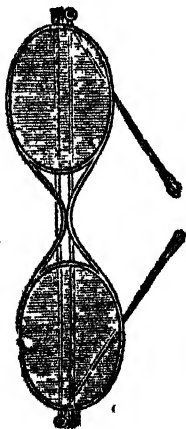
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Acknowledgements of Subscriptions.

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৩৩ নং ক্লাইভ স্ট্রিট কলিকাতা।

ডাম ১/৫ (স্বন্দর টিউব শিশি)

আমরা বিলাত আমেরিকা ও জার্মান রাজ্যের প্রসিদ্ধ ঔষধালয় চহতে বিশুদ্ধ ঔষধ মেলে মেলে আনাইয়া অতি সস্তা মূল্যে বিক্রয় করিতেছি। ডাক্তার সরকার স্বয়ং উপস্থিত থাকিয়া ঔষধাদির ডা. লিউসন পরিদর্শন করেন। আমাদের ঔষধের বিশুদ্ধতা ও অকুপ্রিমতা প্রযুক্ত এত অল্পদিনের মধ্যে অত অধিক কাটতি দাঁড়াইয়াছে। কলেরা ও সাধারণ চিকিৎসার বাস্তব উপায় পুস্তক ও ক্যান্সার সহ ১২, ২০, ৩০, ৫০, ৬০, ৭২, ১০৪, শিশি মূল্য ২, ৩, ৩.৮, ৫, ৬, ৭, ১০, টাকা।

ভিষক-সুহৃৎ ।

শ্রীরাধাগোবিন্দ কর এল্, আর, সি, পি কৃত

(বষ্ঠ সংস্করণ-সংশোধিত, ও বিলক্ষণ পরিবর্তিত) :

ভৈষজ্যশাস্ত্রাধ্যাপ্য পরীক্ষার্থীদের ও চিকিৎসক সকলের সাহায্যার্থ সঙ্কলিত । এই পুস্তকে প্রাক্টিক অব্ মেডিসিন্ মেডিক্যাল্, ডায়েগ্নোসিস্ ঔষধ-দ্রব্যের সাধারণ আময়িক প্রয়োগ, প্রেক্ষপদ পথ্যবিধান, মাত্রাবলী, বিবিধ রোগের পরস্পরের প্রভেদ, প্রভৃতি সমুদয় প্রয়োজনীয় বিষয় সন্নিবেশিত হইয়াছে । উত্তমরূপে বুঝবার নিমিত্ত এই পুস্তকে অনেকগুলি চিত্র দেওয়া হইয়াছে । মূল্য ৬ টাকা ; ডাকমাণ্ডল ১০/০ আনা ।

Copy of para : I only of Government letter * *
dated the 29th Aug, 1896. From the
Lieutenant Governor to the Director of Public Instruction.

“With reference to your letter * dated the 29th August 1899. I am directed to say that the Lieutenant Governor sanctions * the adoption of Dr. R. G. Kar's Work entitled Vishk-Suhrid” in Bengali as an alternative text Book * * * *”

মহামাণ্ড লেপ্টেনেন্ট্ গবর্নর বাহাদুরের পাসপ্তাল স্যাসিষ্টেন্ট মাননীয় শিক্ষাবিভাগের ডিরেক্টর মহোদয়ের নিকট ১৮৯৬ সালের ২৯শে আগষ্ট তারিখে যে পত্র লিখিয়াছেন, তাহার

অনূদিত প্রতিলিপি ।

“আপনার ১৯শ আগষ্ট ১৮৯৬ তারিখের চিঠির সম্বন্ধে আপনাকে এই জানাইতে আদিষ্ট হইয়াছে যে লেপ্টেনেন্ট্ গবর্নর বাহাদুর ডাক্তার আর, সি কর মহাশয়ের বাঙ্গালা ভিষক-সুহৃৎ নামক গ্রন্থের অপসপ্তাল পাঠ্যরূপে নির্বাচন করিয়াছেন ।”

শ্রীগুরুদাস চট্টোপাধ্যায় ।

বেঙ্গল মেডিক্যাল লাইব্রেরী,

২০১ নং কর্ণওয়ালিস্ স্ট্রীট, কলিকাতা ।

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Our food for invalids being dextrinised is a predigested food. Therefore it is digested within a very short time and by a very weak digestive juice in the mouth and stomach. According to the observation of Dr Beaumont on the stomach of Alexis St. Martin (authoritative observation still supported by the Medical world) the length of time required to digest barley (boiled) 1 hour, Sago (boiled) 1 hour 45 minutes, Rice (boiled) 1 hour, Tapioca (boiled) 2 hours. From the above table we can observe that if the usual length of time required to digest the boiled starch be one hour, then our dextrinised or predigested food must be digested in less than one hour which we have observed in several cases by examining the contents of the stomach.

Chemical analysis of our food shows that it contains nearly 90% of most easily digestible starch in the nearly dextrinised form that is, just the material producing animal heat and energy, 7 percent albuminous or mucoproteinous material, 3 percent salt but no sugar &c. While Sago, Arrowroot contain no nitrogenous element and are merely starchy food not so easily digestible. Barley and Tapioca require 2 hours to digest, none of them can be called a food. Of course barley food made by continuous boiling of flour &c. for from 4 to 6 hours is very light and can be digested in one hour.

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1. Two separate issues of the *Indian Homeopathic Review* will be made from May. The English portion will contain 32 pages and its subscription will be Rs. 4.0.0 in advance per annum. The Bengali portion will contain 24 pages and its subscription will be Rs. 2.0.0 in advance. All subscribers who have not paid up their subscriptions upto and for 1904 will please let me know in the annexed memo which copy they will take. Those who want both can have them for Rs. 5.0.0. But the Subscription must be paid up before the issue.

2. All those subscribers who have not paid their arrears of subscription will please remit their dues, for which a statement of account has already been furnished. If the arrears are not closed before the 15th May, the Journal will not be sent to them any more.

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23, SANKAR GHOSH'S LANE.
The 15th April 1904

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S. L. Maitra,
Manager.

J.

THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.]

APRIL 15, 1904.

[No. 4.

Plague.

Every year at the advent of the summer we have the melancholy duty of informing our readers that plague will again make its appearance in this country. It is the wish of the Providence and what can we do. Every year at the end of February, cases of plague are seen in the most thickly populated part of our city and spreading gradually, every part of it is more or less affected.

This year we are rather fortunate that, till so late as the middle of March, there is seldom any case of plague to be seen in Calcutta, and though there are a few, yet we take no notice of it. We expected that there would be no actual outbreak of plague this year. But our expectation is proved to be illusive. As days pass, cases of plague are in the increase and in the beginning of this month, number of the plague roll swells up to such a figure as from ninety to hundred and twenty per day.

We all know that densely peopled places of the city, where there are huts and busty lands, where there are no ventilation, no light, where sun's rays can not penetrate, where there

is no free drainage and cleanliness, there the plague ravages are most. Our city authorities are doing their best to cleanse those places, make better arrangements for housing people, but their attempts are not always crowned with success.

Bubonic cases are more predominant this year than any other form of the disease. 'We have seen a few cases where bubonic glands are swollen and inflamed. In favourable cases these abscesses (buboes) gradually enlarged and suppurated, and cure is effected by the discharge of their contents.

The fever is generally very high, ranging from 104 to 106 and sometimes even more. There are restlessness and agony, much prostration, thirst as a rule not very great and insomnia is not marked in the beginning. Consciousness retained till in the very advanced cases of the disease. There is trembling of the limbs, also listlessness.

Patients generally succumbed from extreme exhaustion, failure of heart's action and sometimes from cerebral depression. Respiration is not very much affected in the early stage of the disease and delirium and unconsciousness also not pronounced till very late.

Our success in the treatment of the disease is rather cheering. I mean the homeopathic therapeutic measures are more potent this year. We very often get spoiled cases from the allopathic hands and they generally prove fatal. If we get cases from the beginning, a systematic Hahnemannian mode of treatment is eminently successful, and cures are genuine.

Bellodonna, in high potencies, is often beneficial. Our old friend Rhustox is able to sustain its reputation even in this year cases. A few friends from out stations, as for instance a friend from Bhagalpur in North Western Bengal told me that Rhustox saved more cases of plague there than any other remedy. He is sanguine that it is a true prophylactic for the disease in question. He is not a medical man but he said he used up about four to six bottles of Rhustox in the course

a few days. The people are flying from the place and our friend is now among us.

The allopathic treatment is of no avail, so the Civil Surgeon of that place wants to have some homeopathic doctors for plague business in the station. We are sorry our numbers are so few that we can not spare any at this urgent time.

A friend from another part of Behar complains to us that they cannot treat cases of plague successfully according to Homeopathic method for want of properly qualified physicians. They have a good harvest there but there is none to reap it. We are told that in some of the places in the N. W. Provinces the termination of plague cases is so rapid and so deadly that no time is available for trying our remedies. In many of these places doctors take to their heels and people are disappointed to get their service.

Plague cases pass through various stages. In the invasion or the first stage of the disease such remedies as Belladonna, Rhustox, Pyrogen, Hyocyamus, Dulcamara, Verat Vir, Ferrum Phos, Kali Mur and Phos are required. They have the power of reducing the temperature and to retard the further onward march of the disease. If however, the disease goes on unchecked it has a tendency either to invade the brain, heart or other internal organs of the body. If the brain is the principal seat of the lesion we can make use of such remedies as Belladonna, Naja, Stramon, Opium, Nux Mos, Ailanthus and the like, they have the power of relieving the cerebral mischief.

If the heart is the organ affected we have Aconite, Calc Ars, Naja, Crotalus, Kali Phos, Hydrocyan Acid, Digitalis, Morphinum and some others of that class, there is a recommendation for Ignatia in cases of plague and it requires our best effort to see what are the special indications of the remedy in this disease.

A Chronic Case.

One day I was called to see an adult Hindu male aged about 30 years, who was suffering from what is called Progressive Muscular Atrophy. His extremities and trunk were much wasted, though his face presented a normal appearance. After much patient enquiry I eliminated the following history. About 9 years ago, he had an attack of gonorrhea of which he was cured in about a year by allopathic treatment. Two years later, *i. e.* 7 years ago, he suffered from a violent attack of malarial fever which was checked by heroic doses of quinine. Being an inhabitant of Burdwan district, he had suffered from several small attacks of malaria before, which were all checked by the same Post-office Powder. Two years ago he had a second attack of gonorrhea which was cured, after one year's suffering, by some medicinal injections. He had a hydrocele for the last 7 years, which were several times tapped. Never had syphilis. About 10 months ago he noticed a sort of weakness and simultaneous wasting of the muscles of the hand. He denied any exposure to cold or wet, or any violent blow on the head or spinal region, or any traumatic injuries of the peripheral nervous system. He denied any circumstance which might have led to his being poisoned by lead or other mineral substance. The attack was insidious, and began in the right hand. There were no aching or tingling pains in the parts affected, but he felt a sort of heaviness and loss of power over them. Soon the ball of the thumb wasted, and the part became flat with the rest of the palm. The movements of the fingers were then impaired. Then the disease spread to the fore arm and the arm. The left hand soon became implicated, the disease advancing in the same order as in the right arm. Within a month the legs became affected, so rapidly that the patient

could not tell which was the first to begin. Then the other muscles of the body became affected. Often he feels a sense of weight and heaviness over the chest, esp. when lying down; this is probably due to the waste of the intercostal muscles. The loss of power over the legs increased more and more, until he could no longer stand. His face has escaped the atrophic change altogether. During all these changes he had never had fever but the extremities often felt cold. There was not pain neuralgic or articular. He never had any loss of power over the bladder or the rectum though for a long time he suffered from constipation. His grandfather was a lunatic, and one of his sisters had developed insanity recently. There was no doubt of a deep seated psoric taint in his organism.

All the muscles of the body were wasted, but those of the lower extremities were observed more wasted than the upper. In the forearm the extensors were more atrophied than the flexors. The muscles of the abdomen seemed not to be much affected, though they were loose and flabby. The muscles of the face escaped altogether, but he felt some sort of tingling sensation in the tongue and some difficulty in deglutition. The functional weakness of the muscles was observed to get increased by cold. The historical knee jirk was absent in both the legs. In the evening he felt a burning pain in the sole of the feet and an aching pain all over the muscles of the body. The intelligence was clear and normal; no headache; no vertigo. The nerves of special senses were not in any way impaired. There was always a tendency to constipation and an accumulation of much gas in his abdomen. For the last 3 or 4 months he had emission of semen at night which occurred frequently, and he had a strong sexual desire. He was very depressed about his recovery, and asked me in melancholy tones whether he would be cured at all.

Like all other doctors, I was requested by his people to make a diagnosis of the case. As I did not like to lose this opportunity of appearing a learned man in their presence, I ventured to say that it was distinctly a case of progressive muscular atrophy. Indeed the thought of multiple nervitis did flash across my mind, but the absence of acute pains, or any pronounced anæsthesia made me inclined towards that bigger name.

Now, about the more important matter, the treatment of the case. I am glad to say that the patient made a very satisfactory recovery after a prolonged and patient treatment of several months. The medicines administered were Nux Vomica 30, only two doses in the beginning, then some doses of Lycopodium 30 and 20Q at great intervals, and lastly one or two doses of Sulphur. I must say that the main credit of the case must be given to Lycopodium to which I was led up by the following characteristics present in the case :—

- (1) aggravation in the evening (4 to 8 p. m.).
- (2) flatulency and constipation.
- (3) beginning in the right side and then going to the left side.
- (4) beginning in the upper extremities and coming down.
- (5) excessive sexual desire and impotency with emissions.
- (6) great emaciation and debility.

Sulphur was given finally to finish the case, for which I confess I did not find any particular indication.

NRJENDRA NATH SET, L. M. S.

Editorial Notes.

The warm weather sets in Calcutta with the usual reappearance of plague, cholera, small pox and other epidemic and eruptive diseases that generally visit the city at this time of the year. Plague however is not so severe this year.

The Calcutta School of Homeopathy re opens after the summer vacation on the 1st June. Its new Calendar shows many improvements which will materially better the condition of the Institution. The Clinical Dispensary which has been put under the able management of our energetic young friend Dr. A. N. Mukerjee will be a feature of special instruction and interest to the students. We hope the School will prosper under the management of its new Secretary Dr. G. L. Gupta.

There was a very pleasant gathering at the residence of Dr. P. C. Majumdar on Sunday evening the 10th April, the birthday of our master Samuel Hahnemann. It is expected this sort of annual communion among the homeopathic fraternity would promote the cause of Homeopathy. We expect to meet again next year at the residence of Dr. D. N. Ray who has promised to entertain us.

There was a bazaar held in aid of the Hahnemann Home of Bournemouth on the 3rd and 4th of February. We are very glad to notice that it was a great success. It shows that England is also beginning to feel the needs of such Homeopathic Institutions, for the bazaar realized over £1000, after payment of all expenses.

A gentleman whose wife was attacked with plague did not like to place his wife under our treatment although he had heard that we had cured his friend Mr. K., because he could not believe how one drop of medicine could act. When we asked him how much of the plague poison did his wife get, he had no answer for us. If one breath of the plague infected air is enough to attack a person, one drop of the right medicine ought to be enough to cure.

The Chairs of Organon and Materia Medica, in the Calcutta School of Homeopathy will be in the hands of Dr. P. C. and J. N. Majumdar respectively.

Observations on Cholera and Dysentery.

Several years ago when Cholera and Dysentery prevailed in a certain place, the following symptoms were cured by the following indicated medicines :—

Camphor—Skin ice-cold, covered with cold sweat ; cramps and diarrhea not violent.

Verat—coldness, cramps and cutting as with knives in the bowels ; violent watery diarrhea ; vomiting with constant desire for cold drink.

Sulph—coldness of skin ; cramps in abdomen and limbs ; nausea and all the common symptoms after midnight.

Do—Diarrhea with little or no pain, coming on in the morning immediately after rising from bed, or worse from midnight till noon.

In common Cholera.

Colocynth—Diarrhea profuse and watery, preceded by violent colic pains, causing the patient to bent double, a position that yields slight relief.

Hecal—Diarrhea with much nausea, all day.

Arsenic—when caused by ice-cream or fruits ; the discharges watery, offensive, very debilitating ; pain in the bowels burning and cutting.

In dysentery.

Sulph—Very often cured the disease at once, especially when the attack came on after midnight ; more tenesmus than pain in the bowels, and that pain work a soreness to the touch.

Croton Tig—Every movement of the body renewed the discharges, producing at first very violent pain in the bowels with tenesmus ; discharge frequent and small.

Colocynth—More cutting pain in the bowels than tenes-

mus, with great tenderness of the abdomen to contact ; desire to bend double.

Nux vom—If the patient had taken brandy or ginger to arrest the disease, and it returned with double violence or pains periodical ; severe colic, tenesmus, nausea or empty retching ; sour taste, aggravation during the day.

Pulsatilla—Tongue coated white ; great sensation of dryness in the mouth, but no thirst ; pain very severe and decided aggravation in the afternoon and evening.

Mercurious Sol—When the aggravation was decidedly in the night.

Belladonna—Often very efficient, when there was much fever in the beginning, with violent throbbing headache and pain in the smack of the back, as if it should break.

Staphi—When pain returned after eating and drinking.

Verat—Painless discharge of great quantities of blood with clots and sensation of sinking in the abdomen.

In Dysentery or Diarrhea caused by eating fruits.

China—Painless discharges.

Bryonia—Worse in the morning, after moving about :

J. K. Maitra.

A few Cholera Cases.

Case 1. A youngman, aged 26 was attacked with Cholera. He placed himself under allopathic treatment but derived no benefit, therefrom in 24 hours and his condition got worse and worse, so that when I called his pulse was imperceptible, he was very restless calling for water frequently, his voice was husky, there was great burning and prostration extreme. He had the true Hippocratic appearance. Arsenic 30 every hour until improvement was noticed. Three hours later I was informed that he had been moved twice and had

passed water each time with it. The prostration was no less, perhaps the restlessness and thirst slightly better. Placebo two powders every two hours.

No better in the evening. When I saw him I was really frightened. He had a glassy fixed look, his pulse still imperceptible, his abdomen slightly tympanitic, his tongue was dry, his brain seemed to be getting paralysed. He had to be moved with difficulty, but still his motions and water continued unabated. I forgot to mention that in this case the patient had no suppression of urine. He had vomited a good deal at the beginning but latterly the vomiting had stopped. Acid Phos 30 every 2 hours. The next morning when I saw the patient, a complete change had come over him. His pulse though weak was distinctly perceptible. All that apathy had gone, he had but two motions during the whole of the night and he looked better all round. He asked for nourishment. I gave him barley water sweetened, and plenty of Placebo and the man made a perfect recovery without the intervention of any other remedial agent.

Case 2. A boy 6 years old was attacked with Cholera two days previous to the day I was called to see him. When I arrived I found the boy slightly drowsy, his pulse in a flickering condition, his eyes slightly injected, his senses somewhat benumbed, his head hot and the rest of the body cold, his evacuations of the rice water consistency and the abdomen slightly tympanitic. Our friends the allopaths say that we are very poor in diagnosis, although it is true that we cure our cases. We admit the short coming, but when we get a case from them, how many of the symptoms are the symptoms of the disease and what portion of it is due to allopathic drugging, it is very difficult to make out. And so it was with the present case. However I gave the poor boy a few globules of Nux Vom 200 dry on the tongue and left a few placebo globules to be administered three hours later.

In the evening I saw him again. His father told me that the boy was slightly better but that he had been slightly delirious during the day, had been sitting up in bed and had been wanting to go home all the time, although he was in his room. His abdomen was still tympanitic but the evacuations have been more yellow. He had been moved twice during day and his pulse was much improved in volume but was very frequent. He had also a slightly flushed appearance. Belladonna 30 one dose dry on the tongue. I also left two more doses in case he got worse at night, otherwise no more medicine.

In the morning the boy looked better all round. His eyes were clear, the tympanitis was gone, he had slept finely well during the night. But he had not passed water even then. Placebo one dose.

In the afternoon I got the report that he passed a quantity of urine about 10 A. M. Had not been moved since and had slept more or less all the time. No more medicine was required and the last time I saw the boy was a fortnight ago when I went to see the father who was suffering from renal colic. He is in perfect health now, it is nearly six months.

Case 3. A girl aged 8 years was attacked with Cholera after her return from of *Ganga Sagar*, a place for pilgrimage, where she had gone with her grand-mother. She had allopathic treatment at the beginning. When I went to see her she was very weak and utterly prostrated. Her eyes were sunken, her pulse feeble, abdominal walls retracted to the spine, but still on pressure there was gurgling noise, and she complained of great pains. She had not passed water for nearly 48 hours, although she was being moved frequently. The stools were greenish yellow and she had a constant nausea, but no vomiting. I gave Colchicum 30 every 3 hours and requested them to report in the evening, when I heard from the patient, I was told that she had been moved only thrice during the whole day and had vomitted up a big worm about 16 inches long.

Then I knew that the worm had been causing all this trouble in the bowels and that now she would get well. If there are any more they would pass out of themselves ; I stopped all medicine. The patient required two three doses of Rhustox when she developed a slow fever and a peculiar rash came out she made a complete recovery. Right here I wish to say that the routine practice of prescribing Cina for worms, is not only very injurious but often it jeopardizes life. I know of physicians running at once for Cina as soon as they think that there are worms. A few lines from the master's own writings may not be amiss here. "I pass over the not unfrequently dangerous, or even fatal effects of such doses, nor I will dwell on the fact that a few lumbrici are not to be considered as an important disease in otherwise healthy children and are common in childhood (where psora is still latent) and generally unattended by morbid symptoms. On the other hand this much is true that, when they are present in large numbers, the cause of this is always some morbid condition of the body namely evolution of psora, and unless this be cured, though large number of lumbrici may be expelled by Cina they are soon reproduced. Hence by such forcible expulsion of worms not only is nothing gained but such improper treatment, if persisted in, often ends in the death of the tortured children"——Hahnemann.

J. N. Majumdar. M.D.

• Change of type in Cholera.

These are undoubted facts, yet no mention of this is made in any of the schools of Medicine either old or new.

In olden days this disease is mentioned as *Bishuchika* in Hindu system of medicine ; it was a fatal disease and consisted of vomiting, purging, as well as, a sensation all over

the body, as of *innumerable needles being pricked into the body* the underlined symptom is not found now a days ; this hastened many to think of this as a complete, different disease altogether within the last two centuries, during which several records of epidemic were noted, there was no other mention of its detail description than vomiting, purging, collapse and of death ; the stool consisted only of a rice water coloured fluid ; in fact, from the allopathic side we cannot expect more than that.

But there is a change of type. During Hahnemann's time it was being treated according to the rules of Hahnemann himself, chiefly by *Camphor* and *Cuprum* and with wonderful success. In the year 1864, Dr. Rubini treated some 500 cases without a single death, his colleagues had nearly the same success. From that time there has come the custom of using camphor at the beginning of cholera, with loose evacuations, but we hardly find any use of it now-a days.

I once heard from the late Dr. Bhaduri about this point. Dr. Bhaduri said, at the beginning of his medical practice, as a Homeopath, the success of Homeopathy in cholera was wonderful ; hardly a case seemed to die ; the only cases which were difficult to manage were those which were treated at first by the *Allopathic* many of these proving fatally. A few years after, many bad cases began to cropped up ; Dr. Bhaduri suspected these to have come from the Allopathic side, although the patient and their friends denied this *in toto* and assured him that they have put these cases in his hand from the very beginning of the disease. Within a short time, most of the cases that came to his hand, were of low type and the mortality was as great as possible.

About 1884, the cases that were cropped up, were mostly treated with *Veratrum* ; Dr. Salzar has just then advocating *Ricinus* and the next 3 or 4 years, good many cases of *Ricinus*

were found ; but it never proved *Genus epidemicus*, of the disease ; Dr. Salzer also recommended *Muscarin* and *Colchicum*—recommendations which bore fruit very soon. I have begun to use *Colchicum* in a few cases with success, when his pamphlet came out. The medicine at that time proved the *Genus epidemicus*, if I remember right, I treated some 40 cases in that season with only that medicine, of these 2 died, 2 passed over to the hands of Allopaths, and one a moribund case, died within 5 minutes after I left. This was the result of 85 P. C. success, but unfortunately I did not keep any statistics.

A few years before, I got my first case of *Muscarin* and since then several of these have come up to me.

At present one rarely meets with cases of *Veratrum* or *Ricinus* ; of *Ricinus* one finds still little ; now one finds cases chiefly of *Colchicum* and *Secale* and a few of *Muscarin* ; occasionally a dose or 2 of *Psorinum*. One would wonder at the name of *Psorinum*, as the curative agent of cholera ; but I have found this and *Sulphur*, either proving curative of themselves after other medicines have failed, or have produced a change in the system leaving to the indications of other medicines.

Ten to 20 years before, cases presented the following type : vomiting, purging, collapse and cramps, of the fingers and toes calling for either *Cuprum* or *Secale*. Now-a-days cramps of fingers and toes, one does not find as a prominent symptom ; cramps may be found feeble at that time, and at intervals, more of the muscles, of the thighs and abdomen, than of the fingers and toes. Collapse is not so rapid now. Thirst developed itself, at the later stage of the disease. There is more brain complications, now than before.

I wish my colleagues should give their own experience of this.

(To be continued.)

B. B. Maitra, M. B.

Model Cures.

Kali CARBONICUM : Irascible, passionate, irritable ; peevish frets and worries about everything ; in constant antagonistic moods , the week before menses has to restrain herself, else she would injure her sister whom she dearly loves. Labor pains in the occiput instead of the uterus.

Arsenicum : A young man has cramp-like pain in the chest ; comes in stormy, cloudy weather ; when walking fast ; from warm, tight clothing ; change of temperature and violent laughing ; has to stand still when walking against the wind. Oppression of the chest, anxiety, alternately cold and hot : raises white slimy mucus, which relieves : coming into a warm room makes him worse

Sepia : A lady, aged 49, stout and fleshy, had catarrh every winter with violent coughing. After being in a draft, the cough was tormenting and dry ; she had to sit straight up day and night, with horrible anxiety about the rattling in chest, with soreness as if raw in the chest ; fears she will suffocate. Sepia 3d produced an aggravation, great orgasm of the chest, sensation as if the throat was being laced ; when a slight expectoration commenced and all her symptoms disappeared.

Badaigo : Since a nervous attack five months ago, a kind of insanity with ecstasy and despair of salvation, his heart troubles him. Any exciting or elating thought causes palpitation more than emotions. Indescribable bad feelings about and below his heart with soreness and pains, flying stitches all over.

Spongia : In rheumatic endocarditis valvular insufficiency ; attacks of severe oppression and pain in the region of the heart ; all the symptoms are aggravated by lying with the head low or an inability to lie down at all.

Lachesis : A French milliner had a jealous quarrel with her lover. With the words : "Oh, my heart !" putting both her hands to it she fell down and was nearly twenty-four hours in an asphyctic state ; no pulse could be felt, breathing was hardly perceptible ; was laid out on her back, Lachesis 30 was followed in a few minutes by a light sighing, turning on her side and recovery.—*The Medical Advance.*

Clinical Records.

Case 1. Carbuncle—A robust young man of good habit and strong constitution had an attack of fever on the 21st July 1903. He is all along a staunch believer in Homeopathy. He called me the same day evening.

Pain over the whole body as if bruised, fever very high temperature 104, restlessness and a good deal of thirst. Arnica 3x one dose every six hours

No better next morning when I saw him. He showed me on his back a small boil with red areola. His urine was examined on one occasion before and it was declared to be diabetic. There were about six grains of sugar in an ounce of urine with a specific gravity of 1025.

I was apprehensive of his boil which though simple at first may develop into real Carbuncle. Next day I gave him Belladonna 30 three times in four and twenty hours.

This had no marked effect. The swelling increased, burning extreme and temperature 105, great prostrations. Arsenic 30 every 4 hours. Feeling better in every respects but the swelling was increased with extended red areola.

Placebo one powder three times a day.

27th July. Fever abated but burning in the carbuncle much, there was a tendency to suppuration.

Could not take his food very well, feeling of acidity and heartburn. Calc. Sulph one dose every six hours. There was distinct fluctuation and in one point it was about to burst.

Calc. Sulph 30 three times. Patient was very uneasy whole night. Could not take his nourishment well, fever was high and considerable prostration, one dose of Calc. Sulph 30 in the morning.

Swelling burst out last night and a thin bloody ichor-like washing of meat came out of it in rather considerable quantity. Urine was increased in quantity and times. Great prostration, complain of palpitation of heart. Calc ars 30 twice to-day. Better next morning. Placebo three times.

The carbuncle less in size, pus like matter came out of it, burning and pain relieved. Placebo continued.

30th July. Another swelling appeared in the side of the chest and it was very much painful, throbbing and burning complained. Silicea 30 one dose at night.

Much better about suffering but the abscess increased in appearance, and became ripe. The other swelling gone down, pus in quantity came out.

Silicea 200 one dose on the 2nd August, and in the evening of the same day the second carbuncle burst itself and copious pus with blood came out of it.

There was much difficulty in lying down as the patient could not change sides. Prostration was great, no desire for food, acidity and heart-burn again, hiccup now and then. Calc 30 twice a day. The patient was improving since then. Urine was much less than before and patient could take much nourishment.

5th August. Pus continued to come out freely and that debilitated the patient. Phos acid 30 one dose at bed time, no more medicine for two days and he continued improving in every respects.

But his sores were not healed up and there appeared two or three pimples very painful and my patient dreaded of their assuming regular carbuncle form. I gave him a few doses of Silicea 200 and it had the desired effect, no more increase of these boils but they were shrivelled up. Small quantity of pus still came out of those big abscesses. Silicea was the last remedy and my patient made a perfect recovery at the end of the month.

Food was simple barley and milk in the beginning but chicken soup and fruits afterwards. Milk was given in good quantity and fortunately my patient took it with relish.

Case 2. *Gangrene of foot.* An elderly gentleman of feeble health and thin worn-out constitution came under my care for the gangrenous destruction of his right foot. He had an attack of fever on the night of the 17th July 1903. Next morning his son noticed a small red pimple on the toes of the right foot. He gave him some allopathic medicines but fever rose high and I was called.

When I saw the patient he was drowsy and delirious, talking nonsense, while the eyes were closed.

Fever was high, temperature 104, tongue dry and covered with brown sordes, bowels constipated.

Good deal of restlessness and when conscious complained much pain and soreness in the affected foot.

Rhustox 30 one dose every four hours.

Fever was less and patient talked to me consciously asked more food, but the gangrenous process advanced, spreading as far as the middle of the foot and redness changed to bluish brown color.

Lachesis 30 three times this day.

Gangrene increased and more drowsy and anxious, Placebo every six hours. No improvement. Fever high, considerable thirst and constant hiccup.

From the gangrenous parts thin dirty reddish fluid came

out in quantity and stincking something, Carbo veg 30 three times to-day.

• No better, gangrene spreading bluish tint and much debility and talking incoherently.

Crotalus H. 30 One dose morning and evening. Next morning gangrene stopped and line of demarkation noticeable. Dilirium less, wanted more nourishment.

No medicine to-day improvement continued. A few more doses of Crotalus were required and patient made a perfect recovery in the course of a month.

I believe the effect of my medicine was tardy owing to the big dose of opium consumed by my patient, I however reduced the dose during his illness.

P. C. Majumdar, M. D.

Materia Medica Notes.

Crotalus Horridus.

The typhoid symptoms of this medicine are conspicuous, these may serve as leading symptoms in cases of plague.

Mind:—Memory weak, stupid, cannot express himself; perception clouded when walking streets; torpid sluggish, incoherent, hesitating, quick indifference; Dilirium with desire to escape; thoughts dwell on death continually—oppression of brain, as if from carbolic acid.

Head:—Vertigo, weakness and trembling, soft weak pulse, dilated pupil, apoplectic convulsions, severe dull headache.

Eyes:—Illusions, vainshing of sights, blood exudes from eye, yellow colour of the eye.

Nose:—Epistaxis in symotic diseases; blood thin, dark uncragnable, flushed face.

Throat:—Slight constriction of the throat. Sensation

of a plug to be swallowed. Impossible to swallow solids. Gangrenous or diphtheretic throat with much swelling of glands.

Respiratory organs:—Excessive oppression of chest. Much pain and palpitation of the heart. Feeling as if heart tumbled over ; pulse hardly perceptible.

Sleep: Drowsiness with inability to sleep. Starting in sleep. Dreams of travelling, of quarrels, of the dead. Symptoms are worst after sleep.

Fever:—Surface cold, specially extremities. Flushes of heat all over, great cold, septic fever, cerebro-spinal meningitis.

Echinacea—Angustifolia.

Echinacea is prized in low typhoid condition, diphtheria, malignant scarlatina, carbuncles, and as a remedy in snake-bites. Some of the symptoms are so specific that we are tempted to use it in cases of plague, and hope our colleagues in this country do justice in giving it a fair trial.

Some of the characteristics are vitality ebbcd ; he became so weak he could not sit up ; disease advanced rapidly ; febrile symptoms, full head, flushed face, and accelerated pulse. Drowsiness is a marked feature, diminution of red blood corpuscles.

Mind:—Dullness in head confused feeling in the brain. Senses seem to be numbed. Drowsy could not read. General depression and weakness. General dullness and drowsiness.

Head:—Vertigo, when changing position of head. Dull headache, felt as if brain was too large with every beat of heart.

Respiratory organs ;—Voice husky. Constant clearing of mucous from the throat. Pain in pectoral muscles. Sore-feeling in the chest. Rapid beating of heart. Heart's action increased. Pulse 80, full and strong, later decreased and again increased. Anxiety about the heart.

Sleep:—General languor. Sleepy. Sleep disturbed, wakes often. Sleep full of dreams. Dreams of dead relations.

Fever:—General chilliness with nausea. Temperature raised a degree with flushed face and fulness of head. Accelerated full pulse. Sweat chiefly in the upper part of the body.

ইণ্ডিয়ান হোমিওপ্যাথিক রিভিউ ।

১৩শ ভাগ ।

১৫ই এপ্রিল ১৯৮৪ ।

{ ৪র্থ সংখ্যা ।

মেটিরিয়া মেডিকা অধ্যয়ন ।

আমরা অনেকবার লিখিয়াছি যে যদি হোমিওপ্যাথিক চিকিৎসার উৎকর্ষ লাভ করিতে কাহারও ইচ্ছা থাকে তবে তিনি এই মতের ঔষধগুণতত্ত্ব বা মেটিরিয়া মেডিকা অধ্যয়ন করুন । হৃৎকের বিষয় আমাদের এ কথা কাহারও কর্ণে প্রবেশ করে না । আমরা দেখিয়া হৃৎকিত হইয়াছি যে অনেকেই রোগের কারণ তত্ত্ব, লক্ষণ তত্ত্ব, ইত্যাদি পড়িয়া বা কতকগুলি রোগীর বিবরণ পাঠ করিয়াই অধ্যয়ন কার্য্য সমাধা করিয়া থাকেন ।

ঔষধের লক্ষণাদি রীতিমত অধ্যয়ন না করিলে যে এই চিকিৎসার পারদর্শী হওয়া যায় না তাহার শক্তিকতা প্রতিপন্ন করিবার জ্ঞাত বিশেষ তর্ক আবশ্যক করে না । হোমিওপ্যাথিক মতের প্রথম সূত্রই এই যে রোগীর লক্ষণের সঙ্গে ঔষধের লক্ষণ মিলাইয়া ঔষধ নির্বাচন করিতে হইবে । কোন রোগ হইয়াছে তাহার চিকিৎসা করা ইহার উদ্দেশ্য নাই । কিরূপ রোগী তাহারই চিকিৎসা ইহাতে হইয়া থাকে । ওলাউঠা রোগের চিকিৎসা বলিলে বিশেষ ফল পাওয়া যায় না কিন্তু ওলাউঠাগ্রস্ত রোগীর সমস্ত অবস্থা অবলোকন করিয়া চিকিৎসা করিতে হয় ।

ভেদবমন হইতেছে, মলের রং সবুজ, পাতলা জলবৎ, অথবা সাদা জলবৎ, অধিক পরিমাণে নির্গত হয় । বমন জলবৎ অধিক হয়, বর্ণ হইতে থাকে বিশেষতঃ কপালে গীতল বর্ণ, রোগী নিস্তেজ হইয়া পড়ে এবং হস্তপদে শীত ধরিতে থাকে, পেটে বেদনা হয় অতিশয় জলতৃষ্ণা থাকে, এরূপ অবস্থায় ভেরেট্রম দেওয়া উচিত । অল্প কোন ঔষধে ইহাতে কাজ হয় না । আর যদি জলবৎ হলুদ বর্ণ মলত্যাগ হইতে থাকে, মল বেগে নির্গত হয়, রোগী ক্ষীণ হইয়া পড়ে, অতিশয় পিপাসা থাকে, জল পান করিলে বমন হইয়া উঠিয়া পড়ে, গা বমি বমি করিতে

থাকে, এই সমুদায় অবস্থায় ক্রোটন দিতে হয়। ইহার ভেরেট্রম আবশ্যক হয় না।

আমরা এমন হোমিওপ্যাথিক চিকিৎসক দেখিয়াছি তাঁহারা ভেরেট্রম ওলাউঠার ভাল ঔষধ বলিয়া এই শ্বেদান্ত প্রকারের রোগীকে ভেরেট্রম দিয়া থাকেন এবং তাহাতে অকৃতকারী হইয়া হোমিওপ্যাথিক চিকিৎসার উপর দোষারোপ করিয়া থাকেন। অনেক অজ্ঞাতশীল এলোপ্যাথিক চিকিৎসকও এই প্রকার চিকিৎসা দেখিয়া বলিয়া বেড়ান হোমিওপ্যাথিক চিকিৎসার আর এখন ওলাউঠা ভাল হয় না।

সম্প্রতি আমরা একটি রোগীতে ইহা প্রত্যক্ষ করিয়াছি। আমাদের স্থলের একজন পরীক্ষোত্তীর্ণ ছাত্র একটি ওলাউঠা রোগীর ঔষধ নির্বাচন করিতে অক্ষম হইয়া এই সহরের একটি খ্যাতনামা হোমিওপ্যাথিক চিকিৎসককে পরামর্শ জিজ্ঞাসা করেন, তিনি সমুদায় অবস্থা ভালরূপ জিজ্ঞাসা না করিয়া, রোগের লক্ষণদি না শুনিয়া আর্মনিক দিতে বলেন। রোগীর লক্ষণের সঙ্গে আস নিকের কোন একটি লক্ষণেরও মিল ছিল না। সেই ছাত্রটি আমাদের পরামর্শ জিজ্ঞাসা করায় আমরা সমস্ত লক্ষণ মিলাইয়া দেখিলাম ক্রোটনের সঙ্গে বেশ ঐক্য হয়, সুতরাং সেই ঔষধ দিতে পরামর্শ দিলাম। রোগীতেও আশাহুরূপ ফল লাভ করা গেল।

আমরা ইতিপূর্বে কয়েকবার লিখিয়াছি যে এই কলিকাতা সহরে একবৎসর এমন এক প্রকার ওলাউঠা দেখা দিয়াছিল যে নিত্য ব্যবহৃত ঔষধ সমুদায়ে কোন ফল পাওয়া যায় না। ডাক্তারেরাও কিছু করিতে না পারিয়া দুঃখিত হইয়াছিলেন, এলোপ্যাথিক ঔষধারা আমাদের দোষ দেখিতে পাউল্লেই সন্দেহ করেন, তাঁহারাও বলিতে লাগিলেন দেখ হোমিওপ্যাথিকে আর কোন কাজ হয় না। লোকেরও অবশ্য সে কথা বিশ্বাস করিতে বাধ্য। আমরা লক্ষণ মিলাইয়া দেখিলাম কল্‌চিকম ইহার উপযুক্ত ঔষধ। যেমন কল্‌চিকম দেওয়া তেমনি রোগ দূর হইতে আরম্ভ হইল। সব গোল চুকিয়া গেল।

এক সময়ে আমরা একটি অররোগী দেখিতে বাই। আমাদের পূর্বে আর একজন খ্যাতনামা হোমিওপ্যাথিক চিকিৎসক তাঁহাকে দেখেন, লক্ষণ না মিলাইয়া বা হয়ত মনঃ কল্পিত গোটাকতক কথা জিজ্ঞাসা করিয়া তাহাকে

একবার বেলেডনা দিতে ব্যবস্থা করেন। আমাদের হোমিওপ্যাথিক স্কুলের উদ্ভাৱক একজন ছাত্র সেইখানে ছিলেন, তিনি বলিলেন মহাশয় এ কিল্প চিকিৎসা হইল। তাহাতে উক্ত ডাক্তার মহাশয় কর্ণপাতও করিলেন না। রোগীর কোন উপকার না হওয়ায় আমরা আহুত হইয়া দেখিলাম যে রোগীর সমস্ত লক্ষণ ইপিকাকের সঙ্গে মিলিতেছে। আমরা যেমন ইপিকাক ৩০ দিলাম অমনি অর ভাল হইয়া গেল।

এরূপ দৃষ্টান্ত আর কত দিব। হোমিওপ্যাথিক চিকিৎসা যাহারা রীতিমত শিক্ষা না করিয়াছেন, যাহারা লক্ষণ সমষ্টির মর্ম না বুঝিয়াছেন তাহাদের দ্বারা হোমিওপ্যাথিক চিকিৎসা করা বাতুলের কর্ম। যাহার মতই এই হইতেছে যে এক দিকে রোগীর লক্ষণ, অন্যদিকে ঔষধের লক্ষণ। এই দুইয়ের একতাই ঔষধ নির্বাচন। তাহাতে অবহেলা করিলে কিল্পে হোমিওপ্যাথিক চিকিৎসা হইতে পারে।

হোমি ও পেথিক মেটরিয়াম মেডিকা বা ঔষধগুণ তাঁহাদের সমস্ত ঔষধের লক্ষণাদি লিপিবদ্ধ করা আছে। সুস্থ শরীরে ঔষধ দ্বেনন করিয়া যে সমুদায় লক্ষণ পাওয়া গিয়াছে তাহা এক স্থানে সন্নিবেশিত করিয়া ঔষধগুণ তত্ত্ব পুস্তকলিখিত হইয়াছে। রোগী দেখিয়া আমরা তাহার লক্ষণাদি জিজ্ঞাসা করিয়া যাহা পাইব, তাহার সহিত ঐ ঔষধসমূহের যেটির অধিক লক্ষণ মিলিত হইবে তাহাই ঐ রোগের ঔষধ বলিয়া পরিগণিত হইবে, ইহা না হইলে চলিবে না। সুতরাং যদি ঔষধের লক্ষণাদি ভাল করিয়া পড়া না থাকে তাহা হইলে ঔষধ নির্বাচনই হইতে পারে না।

এক সময়ে এষ্ট নগরের একজন ধনীরা পীড়া হয়, তাহাতে একজন বিখ্যাত হোমিওপ্যাথিক চিকিৎসক যুবক দেখিতে ছিলেন। এই যুবক হোমিওপ্যাথিক চিকিৎসার প্রকৃত তত্ত্ব বুঝিতে পারিয়াছেন। তিনি নানা লক্ষণাদি মিলাইয়া ঔষধ স্থির করিয়াছিলেন, কিন্তু সেই বিখ্যাত চিকিৎসক আসিয়া তাহার মতে মত দিলেন না। সেট যুবক জিজ্ঞাসা করিলেন আপনি যে ঔষধ দিতে বলিতেছেন তাহার লক্ষণ আর রোগের লক্ষণে কোনই সাদৃশ্য নাই। এরূপ অবস্থায় ঔষধ কেন দিব? তাহাতে সেই চিকিৎসক বলিলেন আমার বহুদশী-তায় এই ঔষধ উত্তম। রাত্রে বাহ্যে তাহার ঔষধ দিয়া কোন উপকার না পাইয়া

সেই যুবকের ঔষধ দেওয়া হয় এবং তাহাতে রোগীর প্রভূত উপকার সাধিত হইয়াছিল।

এই সমস্ত কারণেই আমরা সকলকে ঔষধতত্ত্বের লক্ষণ পাঠে সর্বদা উপদেশ দিয়া থাকি। লক্ষণাদি পাঠ করা অতীব কষ্টসাধ্য সন্দেহ নাই সকল সময়ে সকল লক্ষণ অরণ থাকে না তাহার সত্য, কিন্তু ক্রমাগত পাঠ করিলে ক্রমে ইহাও আয়ত্ত হইয়া আইসে। অল্পবয়স্ক যুবকদিগের শ্রমশক্তি তিক্ত থাকে। সেই সময়ে যদি উহারা মনোযোগপূর্বক পরিশ্রম করিয়া পাঠ করেন তাহা হইলে ইহা আর বড় কঠিন থাকে না। এক সময় ডাক্তার লিপিকে একজন অল্পবয়স্ক চিকিৎসক জিজ্ঞাসা করিয়াছিলেন, আপনি এত লক্ষণ কি করিয়া মনে রাখেন, তাহাতে তিনি উত্তর দিয়াছিলেন যে এক একটা ঔষধ আমি এতবার পড়িয়াছি যে এখন আর আমার মনে রাখিতে কষ্ট বা অসাধ্য বোধ হয় না। আপনারা বয়সে আমিও মনে করিতাম কিরূপে এই বৃহৎ লক্ষণ সমুদয় আয়ত্ত করিব, এখন দেখিতেছি ইহা মনুষ্যের সাধ্যের মধ্যেই আছে, কেবল চেষ্টা করিতে হইবে।

হোমিওপ্যাথি বিজ্ঞান।

শিক্ষক—১৮১৫ খৃষ্টাব্দের ১লা সেপ্টেম্বরে ৪০ বৎসর বয়স্ক কোন এক রজক পত্নী মহাত্মা হানিম্যানের নিকট আসিয়া বলিল “ডাক্তার আজ তিন সপ্তাহ হইল কিছুই উপার্জন করিতে পারিতেছি না, ভাল একটা ঔষধ দেও।”

রোগিণী বলিতেছে তিন সপ্তাহ হইল কিছুই উপার্জন করিতে পারিতেছে না, ইহার ঔষধ হানিম্যানের নিকট চাহিতেছে। হানিম্যানের প্রশ্ন এবং রোগিণীর উত্তর এই ;—

হানিম্যান—কি অন্য উপার্জন করিতে পারিতেছেন না ?

রোগিণীর ১ম উত্তর—কোন প্রকারের অঙ্গ চালনার বিশেষতঃ পদক্ষেপে উত্তরের নিয়ন্ত্রানে চৈরিক দিয়া বেদনা আরম্ভ করে ; ঘুড়া কিরায় অত্যন্ত বৃদ্ধি পায় ; যখন বেদনা আরম্ভ হয়, তখন বামপার্শ্ব হইতে হইয়া থাকে।

হানিম্যান—যখন শয়ন করিয়া থাকেন তখন কিরূপ বোধ করেন ?

রোগিণীর ২য় উত্তর—শয়ন করিয়া থাকিলে উপরোক্ত কোন প্রকারের কষ্ট থাকে না।

হ্যানিম্যান—রাত্রিতে নিদ্রা কেমন হয় ?

রোগিণীর ৩য় উত্তর—রাত্রি তিনটার পর নিদ্রা বাইতে পারি না।

হ্যানিম্যান—আহারে তৃপ্তি কিরূপ ?

রোগিণীর ৪র্থ উত্তর—যখন আহার করি, তখন তৃপ্তির সহিত আহার করি, কিন্তু কিছুকাল পর অসুখ বোধ করি।

হ্যানিম্যান—কি প্রকার অসুখ বোধ করেন ?

রোগিণীর ৫ম উত্তর—আহারান্তে মুখে এত অধিক জল উঠে যে গাল বহিয়া পড়িয়া থাকে।

হ্যানিম্যান—আহারের পর আর কোন প্রকারের অসুখ হইয়া থাকে কিনা ?

রোগিণীর ৬ষ্ঠ উত্তর—আহারের পর ঘন ঘন শূত্র উদগার উঠে।

হ্যানিম্যান—আপনার মেজাজ কিরূপ হইয়া থাকে ?

রোগিণীর ৭ম উত্তর—ডাক্তার আমার অত্যন্ত রাগ হয় ; যখন বেদনা বৃদ্ধি পায়, তখন সমুদায় শরীর ঘর্ম্মাবৃত হইয়া থাকে। এক পক্ষ হইল নিয়মিতরূপে ঋতু হইয়া গিয়াছে। ইহা ভিন্ন আর কোন প্রকারের অসুখ নাই।

হ্যানিম্যান ঈহার শিষ্যকে বলিতেছেন যে :—

আমরা দেখিতেছি যে, বেলাডোনা, চায়না, রাষ্টকসের, ঐরূপ বেদনা জন্মাইবার শক্তি আছে বটে, কিন্তু ইহাদের নড়াচড়া বৃদ্ধি করিবার ক্ষমতা নাই। পালসাটিলায় যুডাফিরায় ঐরূপ বেদনা জন্মাইতে পারে, কিন্তু ইহা পর্যায়শীল ক্রিয়া, মাত্র ; বিশেষতঃ ৪র্থ লক্ষণের সহিত ৫ম এবং ৬ষ্ঠ লক্ষণ ইহার জন্মাইবার কোন শক্তি নাই, ইহার প্রকৃতিও ভিন্ন (অতি সহজেই হাসে এবং ক্রন্দন করে)।

ব্রাইওনিয়ার পর্যায়শীল বেদনার মধ্যে কক্ষাস্থির নিম্নে অর্থাৎ উদরের নিম্ন স্থানে ঐরূপ বেদনা জন্মাইবার বিশেষ শক্তি আছে ; এই বেদনা সামান্য নড়াচড়ায় এমন কি বাহ্য উত্তোলনেও বৃদ্ধি পাইয়া থাকে ইত্যাদি।

বিশ্রামে উপসন্নও ব্রাইনিয়ার লক্ষণ। নকস ভূমিকা ও রাসটক্স ভিন্ন অল্প কোন ঔষধ তাহাদের পর্যায়শীল ক্রিয়ার বিশ্রামবস্থায় রোগী সম্পূর্ণ উপসন্ন

বোধ করে ; কিন্তু আমাদের বর্তমান রোগিণীর অন্ত্র যে কয়েকটা লক্ষণ আছে তাহা দূর করিতে ইহারা পশ্চাৎ পদ ।

তৃতীয় লক্ষণটী ব্রাইওনিয়ার আছে এবং অন্ত্র অনেক ঔষধের ঐ লক্ষণটী আছে ।

৪র্থ লক্ষণ অর্থাৎ আহারের পর ঐরূপ অসুখ ইয়েসিয়া নকস্, মার্কিউরিয়াস, ফেরাম, বেলাডোনা, পালসাটিলা এবং ক্যাস্চারিস জন্মাইয়া থাকে ; কিন্তু ইহাদের কোনটী ব্রাইওনিয়ার স্থায় বেদনা সকল সময় স্থায়ী নাথাকে না এবং রোগিকে তৃপ্তির সহিত খাইতে দেয় না ।

৫ম লক্ষণটী অর্থাৎ মুখ দিয়া প্রচুর লাল পড়া, তাহারা জন্মাইতে পারে, কিন্তু অন্যান্য লক্ষণ ইহারা জন্মাইতে পারে না ।

৬ষ্ঠ লক্ষণটী জন্মাইবার অনেক ঔষধেরই আছে, কিন্তু তাহারা কেহই ব্রাইওনিয়ার ন্যায় প্রবল দীর্ঘকাল স্থায়ী শূন্য উদগার জন্মাইতে পারে না ।

পীড়া সর্বশ্রেষ্ঠ লক্ষণের মধ্যে মানসিক লক্ষণ (সদৃশ আয়ুর্বেদ বিজ্ঞান হুজের ২১২ ও ২১৩ হুজ দেখ) অর্থাৎ এই রোগিণীর প্রকৃতিও ঠিক ব্রাইওনিয়ার প্রকৃতি । ব্রাইওনিয়ার মানসিক লক্ষণটী এই :—Very cross and inclined to anger—অত্যন্ত খিটখিটে এবং অতি সহজেই রাগান্বিত হয় ।

এই রোগিণীর জন্য ব্রাইওনিয়া ব্যবস্থা কষ্ট হইয়াছিল । (ডাইলিসন উল্লেখ নাই), এবং ৪৮ ঘণ্টার পর আসিবার কথা বলিয়া দিয়াছিলেন ।

মহাত্মা হানিমান তাঁহার সন্নিবিষ্ট শিষ্যকে বলিয়াছিলেন ঐ সময়ের মধ্যে তাঁহার রোগিনী নিশ্চয়ই আরোগ্য লাভ করিবেন ।

ছই দিবস পর রোগিণীর আর বিরিয়া আসিল না, দেখিঁয়া তাঁহার শিষ্য রোগিণীর বাড়িতে যাইয়া জিজ্ঞাসা করায় তিনি বলিয়াছিলেন “আমার পুনরায় যাইব্ব কোন কারণ নাই, তাহার পরের দিন হইতেই আমি সম্পূর্ণ আরোগ্য লাভ করিয়াছি, আমি ডাক্তারের নিকট অত্যন্ত বাধ্য আছি, কিন্তু আমাদের নায় লোক কর্ম ছাড়িয়া অন্যত্র বাইতে পারে না, পীড়িত থাকিবার জন্য ৩ সপ্তাহ কিছুই উপার্জন করিতে পারিয়াছিলাম না ।”

শিষ্য - ঔষধ ব্যবস্থা করিয়াই কিরূপে বলিলেন যে, তাঁহার রোগী ৪৮ ঘণ্টার

মধ্যে নিশ্চয়ই আরোগ্য লাভ করিবেন। যদি তাঁহার রোগী আরাম না হইতেন?

শিক্ষক—তাঁহার রোগীর যে নিশ্চয়ই আরাম হইতে হইবে, তাহা নিশ্চয়রূপে জানেন; কারণ, যাহার হোমিওপ্যাথিক ঔষধজাতক্বে অসাধারণ জ্ঞান, তিনি ঔষধ প্রয়োগ করার পূর্বেই বলিয়া দিতে পারেন যে, কতক্ষণ পর তাঁহার রোগী নিশ্চয়ই আরোগ্য লাভ করিবেন। প্রকৃত হোমিওপ্যাথ ভিন্ন একরূপ নিশ্চয় করিয়া আর কেহই বলিতে পারেন না।

শিষ্য—অত্ন মতের চিকিৎসকেরা পারেন না কেন?

শিক্ষক—বিপরীত মতাবলম্বী চিকিৎসকেরা যে অনুমানের উপর নির্ভর করিয়া যথেষ্ট কোন একটা ঔষধ প্রয়োগ করেন, যাহার পীড়ার সহিত কোন সম্বন্ধ নাই, ইহাও তোমাকে পূর্বেই যুক্তি প্রদর্শন পূর্বক বুঝান হইয়াছে। সুতরাং তাহাদের একরূপ নিশ্চয় করিয়া বলিয়া দিবার কোন অধিকার নাই; কিন্তু হোমিওপ্যাথ দৃঢ় বিশ্বাসের সহিত বলিতে পারেন যে তাঁহার রোগী নিশ্চয় আরাম হইবে।

ক্রমশঃ .

শ্রীনিলাস্বর হই।

শিরাভগঞ্জ (পাবনা)।

সূতিকাজ্বর।

প্রসবের পর বিকার লক্ষণাক্রান্ত এক প্রকার জ্বর; অনেকের মতে বিশেষ কোন এক প্রকার বিষণ্ণতা রক্তদূষিত হওয়ায় এই পীড়ার উদ্ভূতি হয়; নব-প্রসূতা স্ত্রীলোক, আরক্ত জ্বর, আঙ্গিক জ্বর, পচন বা বিসর্প পীড়ার সহিত সংশ্লেষে আসিলে এই পীড়া দ্বারা আক্রান্ত হইতে দৃষ্ট হইয়াছে। এই পীড়ার নিয়ম কয়েকটা পীড়া দৃষ্ট হয় :—

(ক) বিকার লক্ষণাক্রান্ত স্বল্প বিরাম জ্বর।

(খ) অল্পবেষ্ট বিলম্বিতপ্রদাহ; সমুদয় উদরের বা শুষ্কতা করায় বেষ্টক অংশের।

(গ) জরায়ুর মাংসপেশীর প্রদাহ।

(ঘ) জরায়ুর আভ্যন্তরিক ঝিল্লীর প্রদাহ।

(চ) জরায়ু মধ্যস্থ শিরাসমূহের প্রদাহ।

(ছ) অন্ত্রবেষ্টক ঝিল্লীর জরায়ুবেষ্টক অংশের প্রদাহ।

(জ) ডিম্বকোষের প্রদাহ ও ফ্যালেপিয়ান নলের প্রদাহ।

যে সকল পীড়ার বিষয় বর্ণিত হইল, সকল জুইই যে পৃথক্ ভাবে হয় তাহা নহে; ২৩টি পীড়া একত্র অল্প বা অধিক পরিমাণে দৃষ্ট হয়; যে পীড়ার প্রাবল্য তাহারই নামে পীড়া অভিহিত হয়।

স্মৃতিকাজর—পূর্বে যে প্রকার প্রবল ছিল, বর্তমানকালে তদ্রূপ নহে; সাধারণ স্বাস্থ্যের ও স্মৃতিকাগারের উন্নতি অল্পসারে এ পীড়ারও হ্রাস হইয়াছে। এ পীড়ার কতকগুলি বিশেষ ধর্ম দৃষ্ট হয়। (১) প্রসবের অতি অল্পকাল পরেই ইহার উদ্ভূতি; (২) পীড়ার অত্যন্ত সাংঘাতিকত্ব, অত্যন্ত অধিক মৃত্যু সংখ্যা; (৩) পীড়ার উদ্ভূতির অতি অল্পকাল পরেই রোগিনীর মৃত্যু; (৪) যে সকল পীড়া রোগিনীর হয়, সুস্থাবস্থাতেও তাহা হইয়া থাকে, কিন্তু প্রসূতাবস্থায় হওয়া হেতু, পীড়া সাংঘাতিক ভাব ধারণ করে; (৫) পীড়া বহুব্যাপী, অথবা মধ্যে মধ্যে উদ্ভূত, (৬) শরীর মধ্যে কোনও একপ্রকার বিষ প্রবেশ হেতু রক্তের দূষণও এই পীড়ার উদ্ভূতি হয় (৭) পীড়া অতি সংক্রামক চিকিৎসকের দ্বারা অন্য প্রসূতির মধ্যে ইহার প্রবেশ হয়; (৮) কোন কোন চিকিৎসকের ইহার বিস্তারের বিশেষ সংক্রামক দোষ দৃষ্ট হয়, অন্যের এককালীন তাহা দৃষ্ট হয় না।

(ক) পীড়ার লক্ষণ :—কোন কোন স্থলে পীড়ার আক্রান্তি প্রসবের অব্যবহিত পূর্বে বা পরে হইতে পারে, তখন পীড়া অত্যন্ত সাংঘাতিক হয় এবং শীঘ্রই রোগিনীর মৃত্যু হয়। সাধারণতঃ প্রসবের দ্বিতীয়, তৃতীয় বা চতুর্থ দিবসে পীড়ার উদ্ভূতি হয়। প্রবল বা বৎসামাত্র শীত; নাড়ী দ্রুত, পূর্ণ ও চাপ্য এবং প্রতি মিনিটে ১২০।১৫০ বা ততোধিক। কোন কোন স্থলে উদরে আত্মান, বেদনা বা স্পর্শসহিষ্ণুতা দৃষ্ট হয় না, অল্প উদরে প্রবল বেদনা, অতিরিক্ত উদরের আত্মান ও স্পর্শসহিষ্ণুতা। পাকস্থলী প্রদেশে বেদনা ও স্পর্শসহিষ্ণুতা এবং বিবমিষা ও বমন প্রকটিতে পারে। অপরিণামতঃ, বম্ব ও শ্বাস বায়ুতে

ঈষৎ দৃষ্ট ও পূর্বের ন্যায় গন্ধ ; . বর্ষে প্রভাবের হ্রাস বা নাড়ীর দ্রুতগতির হ্রাস হয় না । অতিরিক্ত তৃষ্ণা, এক একবারে অধিক পরিমিত জলপান । বনিবন্ধে বা শরীরের অন্য স্থানে, চর্ম্ম নিয়ে কালিমা চিহ্ন দৃষ্ট হয় । জিহ্বা থলুথলে ও লেপযুক্ত । মলিন, কষ্টজ্ঞাপক ও বর্ষযুক্ত প্রকৃতিমূর্ত্তি । পাড়ার বৃদ্ধি অনুঘাতিক উদরাময় দৃষ্ট হয় । এখন রোগিনীর স্নায়বীকৃতি, মানসিক অবসাদ ও ভয় দৃষ্ট হয় ; নাড়ী কোমল, হৃদয় ও অতি দ্রুত ; অতি ঘন ঘন ও হাঁট কাঁটযুক্ত শ্বাস-প্রশ্বাস ; ইহার সহিত উদরের আধ্বান থাকিলে অতি মৃদু লক্ষণ জানিতে হইবে । উদরের আধ্বান বেদনা ও স্পর্শসহিষ্ণুতা দৃষ্ট হয় ।

পাড়ার কোন কোন প্রকার বহুবাণিষে নিম্নবিধ লক্ষণ সমূহ দৃষ্ট হইয়াছে । উদরে বেদনা ; নাড়ীর হৃদয়তা, কাঠিন্য ও অচাপনীয়তা ; চর্ম্মে মধ্যম প্রকারের তাপ । পাড়ার বৃদ্ধি অনুঘাতিক উদরের বেদনার হ্রাস কিন্তু আধ্বানের বৃদ্ধি ; ঘন ঘন শ্বাসপ্রশ্বাস ; চর্ম্মে চট্‌চটে বর্ষ ; জিহ্বার আক্রমণ, কিন্তু কোন প্রকার মানসিক বিকারের অভাব । পঞ্চম দিবসে মৃত্যু ।

কোন কোন স্থলে প্রথম হইতেই পীড়া বিকারযুক্ত দৃষ্ট হয় ; পীড়ার আক্রান্তির কয়েক দিবস এবং এমন কি কয়েক ঘণ্টা পরেও মৃত্যু হইয়াছে ।

প্রথম হইতেই এই পীড়া দ্বারা স্নায়ুকেন্দ্র আক্রান্ত ও রক্ত দূষিত হয় ।

জরায়ুক্রেদের—হর্গন্ধ, পরিমাণের হ্রাস বা এককালীন লোপ হইয়া থাকে ; কোন কোন স্থলে ইহার কিছুই না হইতে পারে । দুগ্ধ ক্ষরণের বিশেষ পরিবর্তন হয় । দুগ্ধ ক্ষরণের পূর্বে পীড়া হইলে, এককালীন দুগ্ধক্ষরণ হয় না, ক্ষরনারম্ভের পর পীড়া হইলে, দুগ্ধের লোপ হয়, স্তনযন্ত্র থলুথলে হয় এবং প্রস্রুতি, নিজের সম্ভ্রান সম্বন্ধে সম্পূর্ণ উদাসিন হইয়েন । নাড়ীর দ্রুতগতি এ পীড়ার আর একটা লক্ষণ ; প্রতি মিনিটে ১২০ হইতে ১৬০ পর্য্যন্ত ; পীড়ার প্রাবল্য অনুসারে ; নাড়ী ক্রমশঃ কৃশ, হৃদয়, সর্ব্বাঙ্গ এবং মৃত্যুর পূর্বে লুপ্ত হয় । জিহ্বায় প্রায়ই খেত লেপ, কদাচিৎ অল্পপ্রকার লেপ ; বিবমিষা, বমন (পৈতিক, পাটল বা কৃষ্ণ তরলের) ; উদরাময়, পীড়ার শেষাবস্থার কালে ও হর্গন্ধী মল । প্রস্রাব, ঘোলাটে, গাঢ় বর্ণের, স্বল্প এবং কোন কোন স্থলে অতি কষ্ট ত্যক্ত । চর্ম্মে মধ্যম প্রকারের তাপ এবং পাড়ার শেষ অবস্থায় তাহাতে চট্‌চটে বর্ষ । বৃদ্ধি বৃদ্ধির প্রায় কোন

প্রকার পরিবর্তন দৃষ্ট হয়—(বিকার লক্ষণাক্রান্ত অস্ত্র প্রকার জরে সহজেই মনোবিকার হয়)।

(খ) অস্ত্রবেষ্ট বিলী আক্রান্ত হইলে, তল্লক্ষণ সমূহ দৃষ্ট হইবে । আক্রমণের পূর্বে প্রায়ই প্রবল কম্প হয় ; তৎপরে জ্বর, উদরে বেদনা, তাপ, তৃষ্ণা, বদনের চাক্চিকা ও দ্রুত শ্বাসপ্রশ্বাস হইয়া থাকে ; বিবমিষা, বমনও দৃষ্ট হয় । উদরে বেদনা প্রধান লক্ষণ ; উদরে হস্তের চাপ সহ্য হয় না, এমন কি বস্ত্রের চাপও অসহ্য ; ইহার উপর মধ্যে মধ্যে বেদনার বৃদ্ধি হয় । পাড়া একটুকু প্রবল হইলে প্রস্রুতি আর পদব্রজ ছড়াইয়া থাকিতে পানেন না ; এখন পদব্রজ শুটাইয়া চিং হইয়া শুইয়া থাকেন ; উদরের আত্মানের বৃদ্ধি হয় । অস্ত্রবেষ্ট বিলী মধ্যে রসস্রাব হইলে উদরের আয়তনের আরও বৃদ্ধি এবং স্পর্শে এক প্রকার কোমল ভাব অনুভূত হয় । উদরের স্পর্শ্যসহিষ্ণুতা এই পীড়ার জাপক লক্ষণ ।

(গ) জরায়ুর প্রদাহ :—জরায়ুতে অত্যন্ত বেদনা ও জ্বর । প্রদাহ, আরোগ্য, পরিপকতা বা বচনে পরিণত হয় । সময়ে সময়ে জ্বর ও মস্তিষ্ক লক্ষণের প্রাবল্য প্রথম হইতে দৃষ্ট হওয়ার, মূল পীড়ার প্রতি লক্ষ্য না আসিতে পারে । পরিপকতা বা পচনে প্রায়ই মৃত্যু ।

(ঘ) জরায়ুর আভ্যন্তরিক বিলী প্রদাহ হইলে, প্রথমে জ্বর ও উদরে বেদনা হয় ; প্রথমে জরায়ুকেদের এককালীন লোপ পরে অপরিণাপ্ত স্রাব হইয়া থাকে ।

(চ) জরায়ুর মধ্যস্থ শিরা সমূহের প্রদাহ । পথমাবস্থায় বাহ্যিক লক্ষণে এরোগ নির্ণয় করা কঠিন ; জ্বর ও জরায়ুতে বেদনা ভিন্ন অন্য কোন বিশেষ লক্ষণ দৃষ্ট হয় না । পীড়ার বৃদ্ধি হইলে, শরীরের বিভিন্ন অংশে ধূমের সঞ্চয় হইয়া থাকে, বিশেষতঃ বৃহৎ সন্ধিসমূহের সন্ধিকটবর্তীস্থ স্থান ।

(ছ) অস্ত্রবেষ্ট বিলীর, জরায়ু বেষ্টক অংশের প্রদাহ । ইহাতে জরায়ুর উপর চাপ পড়িবা মাত্র প্রস্রুতি চমকিয়া উঠে ; শুদ্ধমাত্র জরায়ুর প্রদাহ হইলে, নিম্নোদরে একটু অধিক করিয়া চাপিলে বেদনা বোধ হয় এবং সে বেদনা তীক্ষ্ণ বেদনা নহে ।

(জ) ডিম্বকোষের ও ফ্যালোপিয়ান নলের প্রদাহ । ডিম্বকোষের প্রদাহ হইলে এক বা উভয় কুঁচকিতে বেদনা হয় ; বেদনা সামান্য প্রকারের হইতে পারে

অথবা হস্ত স্পর্শ এককালীন সহ্য না হইতে পারে। হস্তদ্বারা ডিম্বকোষের আন্তর তনু বৃদ্ধি হইয়াছে বুঝিতে পারা যাইবে। ডিম্বকোষ মধ্যে বিভিন্ন প্রকারের বেদনা অনুভূত হয়, কটু কটু করা, দপ্ দপ্ করা, ঝন্ ঝন্ করা, হলবোঁধা ইত্যাদি। দিব্যরাত্রি সমান বেদনা থাকিতে পারে, অথবা সময়ে সময়ে বেদনার বৃদ্ধিও হইতে পারে। প্রদাহ থামিয়া যাইতে পারে, অথবা ডিম্বকোষের পরিপকতায় পরিণত হইতে পারে।

পীড়ার যেগুলি শ্রেণী করা হইল, এক একপ্রকারের পীড়াই যে রোগীকে আক্রমণ করে তাহা নহে। জরায়ুর প্রদাহের সহিত, তদুপরিস্থ অন্ত্রবেষ্টক ঝিল্লীর প্রদাহ এবং তন্মধ্যস্থ ঝিল্লীরও প্রদাহ থাকিতে পারে; ইহার সহিত ডিম্বকোষের প্রদাহও থাকিতে পারে। যে শ্রেণীর পীড়ার লক্ষণ প্রবল থাকে তাহার নামে পীড়া অভিহিত হয়।

পীড়ার গতি ও পরিণাম :—স্থতিকাজরের গতি অতি শীঘ্র, কয়েক ঘণ্টা মধ্যে মৃত্যু হইতে পারে; পীড়ার প্রাবল্য, রোগিনীর ধাতু ও চিকিৎসার প্রকার অনুযায়িক পীড়া কিছু দিবস থাকিয়া মৃত্যু আনিতে পারে। যে স্থলে দ্রাব্যকেন্দ্র প্রথম হইতে আক্রান্ত সে প্রকার পীড়া অতি সাংঘাতিক; তন্নিম্নে রক্তধার মস্তুলের আক্রান্ত হেতু, জরায়ুর কোমলত্ব ও পচন; তন্নিম্নে জরায়ুর প্রদাহ, তন্নিম্নে অন্ত্রবেষ্টক ঝিল্লীর প্রদাহ; সর্ব নিম্নে জরায়ুর শিরা সমূহের প্রদাহ।

চিকিৎসা :—বিকার লক্ষণাক্রান্ত অরের যে চিকিৎসা ইহার তাহাই চিকিৎসা। জরায়ু, ডিম্বকোষের ও অন্ত্রবেষ্ট ঝিল্লীর প্রদাহের সাধারণ চিকিৎসা আবশ্যক। প্রসূতির মানসিক ও শারীরিক স্থিরতা সম্বন্ধে ও পথ্য সম্বন্ধে বিশেষ লক্ষ্য রাখিতে হইবে। শীতল পানীয় বিলক্ষণ প্রয়োজন।

আস', এক, বেলা, এপি, ব্যাপ্টি, ব্রাই, কার্বলিক আসিড, সিমিসি, হারসি, ক্রিসজোট, ল্যাকে, ওপি, রন্ টক ও সিকেলি। জরায়ুর প্রদাহ প্রবল হইলে, মাকুরিয়াস, হিপার সলফ, ব্রাই, বেলা ইত্যাদি। অন্ত্রবেষ্ট ঝিল্লী প্রদাহে, মাকুরি-ক, কলসি, ব্রাই, এপস। ডিম্বকোষ প্রদাহে এপিস, ল্যাকোসিস, বেলাডোনা, কলসি, প্লাটি ও কাছা। এই সকল প্রস্তাবে ঔষধাবলীর লক্ষণসমূহ দ্রষ্টব্য।

উপরে লিখিত ঔষধাবলীতেই যে এই রোগের চিকিৎসা করিতে হইবে তাহা

নহে। মৎপ্রণীত জ্বর চিকিৎসায় ঔষধাদির লক্ষণাদি বিশদরূপে বর্ণিত হইয়াছে।
নিম্নে কয়েকটা ঔষধের প্রধান লক্ষণাদি লিখিত হইল।

একুনাইট :—প্রবল জ্বর, চর্ম্মের শুষ্কতা, অস্থিরতা ও মানসিক উত্তেজনা ;
মৃত্যুভয় ; তৃষ্ণা ; জরায়ু-ক্লেদের লোপ ; সমুদয় উত্তর মধ্য দিয়া মধ্যে মধ্যে কর্তক
বেদনা।

এপিস্ মেলিকা :—বস্তি মধ্যে কোষিক বিধানের প্রদাহ (Pelvic
cellulitis) ; জরায়ু প্রদেশে অত্যন্ত স্পর্শসহিষ্ণুতা ও কুহক বেদনা ; জরায়ু
ক্লেদের ও হৃৎ স্রবণের লোপ।

আর্সেনিকম্ আধম্ :—দাহকর দপ্ দপানি ও ছোরা বিকনের ত্রায় বেদনা ;
অস্থিরতা, উত্তেজনা ও মৃত্যুভয় ; অত্যন্ত অবসন্নতা ও জীবনী শক্তির হ্রাস ; বিবমিষা
ও বমন , বারম্বার ও অল্প অল্প জলপান ; নাড়ীর দ্রুত, সূক্ষ্ম ও সবিরাম পতি।

ব্যাপ্টিসিয়া :—বিকার লক্ষণ ; জরায়ু ক্লেদে অতি দুর্গন্ধ ও অত্যন্ত অব-
সন্নতা ; উদরের আত্মান ও কল্ কল্ করা, শুইলে শ্বাস কষ্ট ; অস্থিরতা ; সকল
প্রকার স্রবণে (মল, মূত্র ইত্যাদি) অত্যন্ত দুর্গন্ধ ; নাড়ীর ক্ষীণতা।

বেলোডনা :—প্রবল জ্বর, শিরঃ পাড়া ও চর্ম্মে অল্প অল্প ঘর্ম্ম ; মস্তকে দপ্
দপানি ; তদ্রাতুরতা, কিন্তু নিদ্রা না হওয়া ; উদরের স্পর্শসহিষ্ণুতা ; বেদনার
হঠাৎ উদ্রেকান্তে কিরণক্ষণ থাকিয়া হঠাৎ বিলোপ, তৃষ্ণা ও মুখের শুষ্কতা ; জরায়ু
ক্লেদের স্বল্পতা বা লোপ ; স্তনদ্বয়ের প্রদাহ বা হৃৎ স্রবণ না হইয়া থল থলে।

ট্রাইওনিয়া :—জ্বর ও অত্যন্ত তৃষ্ণা, উদরে অত্যন্ত বেদনা ; কোন প্রকার
নড়াচড়ায় অত্যন্ত কষ্ট হওয়া ; এক একবারে অধিক পরিমাণে শীতল জল পান ;
যেন মাথা কাটিয়া যাইবে এইরূপ শিরঃপাড়া।

কাইরাস্ :—জ্বর ও শরীর মধ্যে দাহবোধ, ঘন ঘন মূত্র বেগ ও প্রতিবারে
অল্প পরিমাণে বা কয়েক বিন্দু মাত্র লাল মূত্র ত্যাগ। জরায়ু প্রদেশে দাহবোধ।

কার্কলিক্ আসিড্ :—বারম্বার ও অল্পক্ষণ স্থায়ী কপ্পের সহ তাপের পর্য্যায় ;
তাপান্তে অপব্যাপ্ত ঘর্ম্ম ও অস্থিরতা ; জরায়ু প্রদেশে বেদনা। নাড়ীর দুর্বলতা ;
উদরাময়, অসাড়ে দুর্গন্ধী মলত্যাগ ; জরায়ু ক্লেদের লোপ।

হায়সিয়ামস্ :—জ্বর, প্রলাপ, ও বিভিন্ন মাংসপেশীর আক্কেপ ; রোগিণীর
উলঙ্গ হইবার চেষ্টা।

লাটেকসিস্ :—জরায়ু ক্লেদের লোপ ও তাহাতে দুর্গন্ধ ; অচেতনতা ; জরায়ু প্রদেশে হস্তের কোন প্রকার চাপ সহ না হওয়া ; রক্তস্রাব হইলে জরায়ুর বেদনার হ্রাস, কিন্তু তাহা বন্ধ হইলে, জরায়ুর বেদনার পুনরুদ্রেক ।

ওপিয়ম্ :—জরকালীন ভয় লক্ষণ বা ভয় পাইয়া পীড়ার উদ্রেক ; নিদ্রাতুরতা তৃষ্ণা ; জরায়ু হইতে দুর্গন্ধী স্রাবের নিঃসরণ ।

প্লাটিনম্ :—প্রসবাস্তে বাহ্যিক জননেজ্রিয়ার স্পর্শসহিষ্ণুতা ও তথায় বস্ত্র রাখার সহ না হওয়া ; যোনিদ্বারের সুড় সুড়ানি ; গাঢ় ও কাল রক্তের স্রাব ।

রস্ টক্স্ :—দুর্গন্ধী জরায়ু ক্লেদের অধিক কাল স্থায়িত্ব ও বারম্বার দৃষ্ট হওয়া ; জ্বর ও দুগ্ধ ক্ষরণের লোপ ; অস্থিরতা, কোন প্রকার অবস্থান অধিক ক্ষণ থাকিত না পারা ; অত্যন্ত তৃষ্ণা, শরীর টিপিয়া দিলে সুস্থতা বোধ করা ।

সিকেলি :—পচন ভাব ; ঈষৎ লাল স্রাব ও অত্যন্ত অবসন্নতা ; উদরাময় ও দুর্গন্ধী মল ; সর্বশরীরে শীতল ঘর্ষ ; পচন ।

(ক্রমশঃ)

শ্রীরিপিন বিহারী মৈত্র, এম্, বি ।

রোগী সমাচার ।

১। আমরা । জেলা হুগলি, থানা হরিপাল, গ্রাম পানিসেওলা, মহামান্য High Court Judge মাননীয় শ্রীল শ্রীযুক্ত বাবু সীরদাস প্রসাদ মিত্র মহাশয়ের পৌত্র, বয়স ৪৫ বৎসর, দিগন্ত সন ১৩০৯ সাল ফাল্গুন মাসে ৬দোল যাত্রায় ৪৫ দিবস পূর্বে, রক্তামাশয় রোগে আক্রান্ত হয় । রোগীর পিতা শ্রীল শ্রীযুক্ত বসন্ত বাবু উচ্চ শিক্ষিত ও হোমিওপ্যাথিক বিশ্বাসী ব্যক্তি, বাটীতে হোমিওপ্যাথিক থাকায় নিজে ৪৫ দিন হোমিওপ্যাথিক মতে চিকিৎসা করায় পরে রোগ উপশম চর্চা না হওয়ার বিশেষ ভাবিত হইয়া আমাকে আহ্বান করেন, আমার বাটী হইতে রোগীর বাটী প্রায় ৫ ক্রোশ দূর । আমি বেলা ১০।০ টার সময় যাইয়া পৌছিলাম ; দেখিলাম রোগী শয্যাগত, শুনিলাম দিন রাতে ২০।২৫ বার বাছে হইতেছে, ২।৪ বারের মল সরায় ধরা ছিল । অনেক কৌতাবির পর অতি অল্প স্বাদ্য মল নির্গত হয় । পেটের মধ্যে কল কল শব্দ হয়, বাছের বেগ হঠাৎ

পূর্বে ছেলে পেটে হাত বুলাতে বলে এবং অভ্যস্ত ক্রন্দন করে, পর ক্ষণেই বাহ্যের বেগ আসে। মলের পূর্বে, পরে এবং মলের সহিত রক্ত নির্গত হয়। প্রস্রাব প্রায় হয় না, কোন বারে ২১ ফোটা হয়। রোগী অস্থির। পিপাসা নাই, মল নির্গত কালিন পক্ষ পঙ্কশব্দে বায়ু নিঃসরণ হয়। শুনিলাম ইতি পূর্বে রোগীর পিতা Merc, Puls, Ipec, ঔষধ প্রয়োগ করিয়াছিলেন তখন অনেক ভাবিয়া, ভগবানকে প্রণাম করিয়া, আদি গুরু 'হানিমানের' স্মরণ লইয়া, রোগী Aloe'র লক্ষণ যুক্ত বলিয়া জ্ঞান হওয়ায় আসি Aloe 30 এক ডোস দিয়া স্নানাহার করিতে গেলাম। পথ্য মাঝে মাঝে বিলাতী বিসকুট এক আধ খানি দিতে বলিলাম। আহারান্তে আসিয়া দেখি বালকটী সুস্থভাবে নিদ্রা যাইতেছে; পার্শ্বস্থিতা হিন্দু স্থানী দাই বসিমা আছে, আমার ঔষধ খাওয়ানোর পরে আর কয়েক বার দান্ত গিয়াছে জিজ্ঞাসায় দাই কহিল, ডাক্তার বাবু! আপনার ঔষধের পরে দুই বার ঝাড়া গিয়াছে, কিন্তু শেষ বারের ঝাড়া আর এক রকম হইয়াছে, এমন ঝাড়া আজ ৫৭ দিন থোকা বাবুর হয় নাই—; শেষ বারের মল দেখিলাম, মলাংশ অধিক এবং রক্তাংশ অল্প, মল কতক থস থসে এবং ন্যস্তক জলীয় ইসদ হরিদ্র বর্ণ এবং শেষ বার বাহ্যের পরে থোকা বাবু বেশ নিদ্রা যাইতেছে। আমি দাইকে কহিলাম যে, যতক্ষণ আপনি নিদ্রা ভঙ্গ না হয় ততক্ষণ ঔষধ বন্ধ থাকিবে, পরে আপনি জাগরিত হইলে ৪ ঘণ্টা পরে আর এক বার ঔষধ সেবন করাতে বলিলাম। আর এক ডোস ঔষধের পরে আর একবার উপরোক্ত শেষ বারের বাহ্যের নাগ্ন্য বাহ্যে হইল তখন ৪ ঘণ্টা পরে আর এক মাত্রা ঔষধ (Aloe) দিলাম। পুনরায় ৮ ঘণ্টা পরে আর এক বার বাহ্যে হইল তখন রোগীর পিতা বসন্ত বাবু ব্যস্ত অথচ প্রেক্ষণ চিত্তে তাড়া-তাড়ি আমাকে বাড়ীর মধ্যে পুনর্বার লইয়া গেলেন, দেখিলাম এবারকার মল সম্পূর্ণ পরিবর্তিত, হরিদ্রা বর্ণ মলসংযুক্ত অধিক পরিমাণে বাহ্যে হইয়াছে এবং অধিকমাত্রা সরল প্রস্রাব হইয়াছে, রক্তের চিহ্ন আদৌ নাই। ছেলে বলিতেছে ডাক্তার বাবু, বহু ভুখ, লাগ্তা হায় এবং আরও অন্যান্য বালকের সহিত খেলা করিবার ইচ্ছা প্রকাশ করিতেছে। ঔষধ এবার Aloe বন্ধ করিয়া Magnesia Carb—6x এক মাত্রা দিলাম। পথ্যের জন্য বড় ব্যস্ত করায় বিলাতি বিসকুট ২৪ খানা বেশী করিয়া ব্যবস্থা করিলাম। আমি সন্ধ্যার গাড়িতে

বাটী চলিয়া আসিলাম। আবশ্যক হইলে, আর এক দাগ Magnesia ৬ ফোটা দিতে পারেন এবং আগামী প্রাতে সংবাদ দিতে বলিয়া আসিলাম।

পর দিন প্রাতে সংবাদ পাঠিলাম যে অধিক রাত্রি আর একবার হরিদ্রা বর্ণ পাতলা দান্ত হওয়ার এক দাগ Magnesia দেওয়া হইয়াছিল সেই অবধি আদৌ আর বাছে হয় নাই। থাইবার জন্ত বড়ই অস্থির করিতেছে ; এক্ষণ পত্র পাঠিয়া পত্রোত্তরে China 30 দিবসে দুইবার আর লবণ সংযুক্ত জলবালি ৩ ঘণ্টান্তর ২।১ বিস্কুট এবং সময়ে ২ বিলাতি বিস্কুট ২।১ খানি ব্যবস্থা করিলাম। ৪ দিন পরে পুনরায় সংবাদ আসিল যে ছেলে সম্পূর্ণ আরোগ্য হইয়াছে আর কোন গোলোযোগ নাই, ভাত থাইবার জন্ত অত্যন্ত জালাতন করিতেছে—পত্রোত্তরে লিখিলাম—ঔষধ বন্ধ, পথ্য প্রথম দিন মুণ্ডর দালের ঝোল ও বিলাতি বিস্কুট, দ্বিতীয় দিন মৎস্যের ঝোল বিলাতি বিস্কুট, তৃতীয় দিবস প্রাতে মৎস্যের ঝোল অন্ন ব্যবস্থা করিলাম আর ঔষধের আবশ্যক হয় নাই।

২। শিশুর উদরাময়। জেলা হুগলি, থানা সিঙ্গুর, গ্রাম সিঙ্গুর। বিগত সন ১৩০৯ সালের ভাদ্র মাসে জমীদার শ্রীলু শ্রীযুক্ত বাবু স্মনাথ নাথ বর্ষণ মহাশয়ের পুত্র ভূমিষ্ঠ হইবার ১০ দিন পরে প্রবল উদরাময় রোগে আক্রান্ত হইবামাত্র আমাকে আহ্বান করেন আমি বেলা প্রায় ১২টার সময় উপস্থিত হইয়া দেখিলাম অন্ন অন্ন জলবৎ সবুজ বর্ণের মল অন্ন কৌতানির সহিত নির্গত হইতেছে, টেমপারেচার ১০১ ডিগ্রী। গাত্র শুষ্ক, গরম, অস্থিরতা ক্রন্দন এবং মধ্যে মধ্যে জীহ্বা চোটে ব্লাইতেছে, ভাবে বুঝিলাম পিপাসা আছে এই সকল লক্ষণ দেখিয়া আমি Aconite Nap 1x ১ ঘণ্টা অন্তর ব্যবস্থা করিলাম ; ২।৩ মাত্রা ঔষধ সেবনের পরে দেখিলাম মলের স্বভাব, বর্ণ পূর্ববতই আছে, অবসন্নতা, শীর্ণ, বিবর্ণ হস্ত পদ ঠাণ্ডা, মুখ চূপসান, অসাড়, মল ত্যাগের পরে ছেলে নেতায় পড়িতেছে ; তখন Aconite বন্ধ করিয়া Arsenic 6x এক ঘণ্টা অন্তর ব্যবস্থা করিলাম এবং রোগীর পিতা মাতা ও পরিবারবর্গ সকলেই হতবাস ও সকলকে বিসন্ন ভাবে দেখিয়া আমি স্পষ্টই রোগীর পিতামহাশয়কে ডাকিয়া বলিলাম শোকের অবস্থা আমি ভাল বুঝিতেছি না, এক্ষণে আমার উপর যদি বিশ্বাস ভক্তি থাকে এবং চিকিৎসা ভার রাখেন তাহা হইলে কোন উচ্চ ও শ্রেষ্ঠ হোমিওপ্যাথিক ডাক্তারের সহিত পরামর্শ, আমার আবশ্যক। তৎক্ষণাৎ যুক্তি করিয়া শ্রীকৃষ্ণ-

পূর নিবালী বহুবিক্র, বিচক্ষণ এবং সর্বশ্রেষ্ঠ হোমিওপ্যাথিক ডাক্তার বাবু গোপাল চন্দ্র গোস্বামী মহাশয়কে টেলিগ্রাফ দ্বারা আহ্বান করা হইল। ইত্যবসারে আমি প্রাণপণে রোগীর তত্ত্বাবধারণে নিযুক্ত এবং গৃহস্থ সকলকে আশ্বাস বাক্য দ্বারা সান্ত্বনা করিতে লাগিলাম। ভগ্নবানের কৃপা ধন্য, মহাত্মা হানিমানের বুদ্ধিমত্তা ধন্য, Arsenic এক দাগ মাত্র খাওয়ানোর পরেই যে ছেলে মৃত্যুর অঙ্কে শয়ন করিতেছিল, মৃত্যু মুখ ব্যর্থন পূর্বক গ্রাস করিতে উদ্যত হইতেছিল, তাহার এক দাগ সেবনে ভোজ বাজীর ছাত্র সকল কুলক্ষণ দূরীভূত হইয়া আরোগ্যের পথে আসিয়াছে। ছেলে স্থিতির ও শ্বগভীর নিদ্রীত, হস্ত পদ ও সমস্ত শরীর গরম, মুখে আর সে নীলিমা বা কালিমার আভা নাই, মুখ ও অঙ্গুলির চোপসান ভাব নাই, বাহ্যে বদ্ধ হইয়াছে, ইতিমধ্যে একবার সরল প্রস্রাব হইয়া গেল অর্থাৎসকল প্রকারের মূলক্ষণ দেখিতে পাইলাম। প্রায় ঘণ্টা নিদ্রার পরে একবার ইসদ পিত্ত ইসদ হরিদ্রাবর্ণ মিশ্রীত ভেদ হইল, পা শুটাইয়া রাখিতেছে, দেখিয়া Chamomilla 6x এক দাগ দিলাম এমন সময় সন্ধ্যার প্রাকালে গোপাল বাবু আসিয়া উপস্থিত হইলেন। তিনি আদি ও আন্তঃসমস্ত তত্ত্বাদি এবং বর্তমান অবস্থা দেখিয়া আমার শেষ দেও Chamomilla ঔষধই বর্তমান অবস্থার ঠিক ঔষধ প্রকাশ করিলেন। পথ্য ও শ্রমাস্তর একবিমুখ কলবালি ব্যবস্থা করিলেন। ভয় নাই, ভয় নাই, ছেলে আরোগ্য হইয়াছে, প্রথম চিকিৎসকের হস্তে জীবন দান পাইয়াছে বলিয়া গৃহস্থকে আশ্বাস বাক্য প্রদান করিলেন। রাত্রি অধিক হইল এবং গৃহস্থও অনেকাংশে শান্তিলাভ করিল দেখিয়া এবং আমিও অধিকতর ক্লান্ত হওয়ার, গোপাল বাবু ও আমি উভয়েই বিদায় গ্রহণ করিলাম।

পর দিবস প্রত্যবে পুনরায় আহত হইয়া দেখিলাম রোগী সর্ব বিধায়েই স্তুবিধা কেবল ইলুদ গোলা মল সংযুক্ত বাঁহে অনেক বিলম্বে বিলম্বে হইতেছে, বাহ্যের পূর্বে পেটে একটা বাতনা আছে বলিয়া বোধ হইল কেননা বাহ্যের পূর্বে ছেলে কাঁদে এবং পা পেটের দিকে শুটাইয়া রাখে ইত্যাদি লক্ষণ দেখিয়া এবং গৃহস্থামীর অনুমতি ক্রমে উক্ত ডাক্তার গোপাল বাবুকে Report লিখিলাম।

পর দিবস প্রাতে যাইয়া দেখিলাম গোপাল বাবু আমার Report অনুসারে Natrum Sulph 6x ব্যবস্থা করিয়াছেন। এক্ষণে অন্য আর কোন ঔষধের

আবশ্যক নাই প্রকাশ করিলাম। অদ্য কেবলমাত্র অধিক দুর্বলতা নি
China 30 দিনে ২বার করিয়া ব্যবস্থা করিয়া বাটী চলিয়া আসিলাম আর
কোন ঔষধের প্রয়োজন হইল না।

শ্রীমাত লাল দাস।

হোমিওপ্যাথিক চিকিৎসক, বলরামঝাটা, সিঙ্গুর।

একিনেসিয়া এক্টি-ফোলিয়া।

রক্ত দূষিতকারী নানা প্রকার পীড়ায় এই উপরিলিখিত ঔষধের ক্রিয়া বিশেষ-
রূপে দৃষ্ট হইয়াছে। আমাদের দেশে যদিও এই প্রকার রক্ত দূষিতকারী পীড়া
অনেক আছে তথাপি ইহার ভালরূপ পরীক্ষা করা হুইল নাই।

আমেরিকার ডাক্তার কালেকজাণ্ডার হারমেন্স এই ঔষধ সম্বন্ধে অনেক কথা
মেডিক্যাল এডভান্স নামক পত্রিকায় লিপিবদ্ধ করিয়াছেন। অথবা এ স্থলে
স্থূল-স্থূল বিষয়ের অবতারণা করিব। বিশেষ প্লেগ নামক শোণিত পীড়ার ইহার
কার্য পরীক্ষা করিতে আমরা সকলকেই অনুরোধ করিতেছি। আমাদের দেশীয়
ডাক্তার জি, এল, গুপ্ত যিনি হেরিং মেডিক্যাল কলেজ হইতে পাশ হইয়া
এই সহরে যশের সহিত প্রাক্টিস করিতেছেন তিনি আমাদেরকে প্লেগ রোগে
এই ঔষধ ব্যবহার করিতে অনুরোধ করিয়াছেন।

ডাক্তার হারমেন্স কেবল আবার্টনিত শোণিত দূষিতকারী জ্বর ইত্যাদি
পীড়ার ইহার কার্য উপলব্ধি করিয়াছেন। তিনিও অন্তঃস্ত্র ভীষণ পীড়ার ইহার
ব্যবহার অনুরোধ করিয়াছেন, তাহাঙ্গ লিখিত হই একটী রোগীর বৃত্তান্ত আমরা
এস্থলে উদ্ধৃত করিতেছি।

১। রোগী একটা ৬০ বৎসর বয়স্ক পুরুষ। কাগজের বাস্ত প্রস্তুত করা
ইহার কাজ। হঠাৎ কাজ করিতে করিতে দক্ষিণ হস্তের বৃদ্ধ অঙ্গুলি কাটিয়া যায়,
প্রথম দিন কোন বিশেষ কষ্ট হয় না। পরদিন দেখা গেল যে অঙ্গুলি বিশেষ
ফুলিয়াছে ও তাহার বর্ণ নীল আকার ধারণ করিয়াছে এবং তাহাতে তন্নানক
কর্তনব্যৎ বেদনা উপলব্ধি হইতেছে।

পরদিন ডাক্তার হারমেন্স গিয়া নিম্নলিখিত অবস্থা দেখিতে পান।

অঙ্গুলি ভয়ানক ফুলিয়াছে ও তাহার বর্ণ নীল বা গভীর রক্তবর্ণ। কর্তনবৎ জালা করা, কর্তন স্থান হইতে উপরে হস্তে উঠিয়াছে, রক্তবহা নাড়ী ক্ষীণ ও তাহা স্পর্শ করিলে বেদনা, বগলের মধোর গ্রন্থি ক্ষীণ ও অতিশয় বেদনায়ুক্ত। শরীরের সমস্ত পেশী বেদনা যেন জাঁতা দিয়া পিসিয়াছে। মাথা ঘোরা ও গা বমি বমি করা। পদদ্বয় কম্পন ও হাঁটিতে অক্ষম, মাথা ধরা ও মাথার চাঁদি অত্যন্ত ভারি বোধ, অতিশয় দুর্বলতা, মুখমণ্ডল রক্তহীন ও মৃত ব্যক্তির স্থায়। উদরাময়, বারবার পাতলা দুর্গন্ধযুক্ত মলত্যাগ। গলা ফুলা, গিলিতে কষ্ট, কাশিতে রক্ত-মিশ্রিত স্লেয়া উঠা, জিহ্বা ফুলা ও নীল বর্ণ, স্পর্শ করিলে বেদনা, শরীর বড় তাপ ১০৩ ডিগ্রি। নাড়ীর গতি এক শত। ল্যাকেসিস ২০০ তিন ঘণ্টা অন্তর এক এক মাত্রা। বেলা ৯টার সময় এই ঔষধ দেওয়া হয় রাত্রি ৮টা পর্য্যন্ত কোন উপকার হয় নাই। ঔষধ পরিবর্তন করা হয় নাই। প্রাতঃকালে ঐরূপ অবস্থা দেখিয়া আর্সেনিক লক্ষ ডাইলিউসন একমাত্রা দেওয়া হইল।

পরদিন রোগীর অবস্থা মন্দ বোধ হইল। দুর্বলতা বৃদ্ধি এবং প্রলাপ আরম্ভ হইল। শরীরের তাপ ১০৩ হইল, একিনেসিয়া অমিশ্র আরক এক গ্লাস জলে ২০ কোটা দিয়া চার চামচের এক এক চামচ প্রত্যেক ঘণ্টায় দেওয়া হইল। ঐ ঔষধ জলে দিয়া ন্যাকড়া ডিআইয়া ক্ষত স্থানে দেওয়া হইল।

পরদিন ৩টার সময় উদরাময় কম হইল। অগ্রাহ্য লক্ষণ ঐরূপ দেখিয়া একিনেসিয়াই চলিল। পরদিন প্রাতঃকালে নাড়ী ভাল, তাপ ১০১ ডিগ্রি। বেদনা কম, ক্ষত স্থানের বর্ণ পরিবর্তন। দুই ঘণ্টা নিদ্রা হইয়াছিল, ঐ ঔষধ দেওয়া হইতে লাগিল।

তৃতীয় দিনে রোগী অনেক ভাল। তাপ স্বাভাবিক হইল, নাড়া ভাল, উদরাময় নাই। গলার ব্যথাও ভাল হইল। এক সপ্তাহে রোগী সম্পূর্ণ আরোগ্য লাভ করিল।

২। রোগী জীলোক বয়স ২২ বৎসর। কোন বাস্তবিক ভিত্তিতে গিয়া তাহার হাতে কাঁটা বিধিয়া গেল। পরদিন রোগীর নিম্নলিখিত অবস্থা দাড়াইল।

হাত অত্যন্ত ফুলিয়া গেল। চারিদিক লাল হইয়া উঠিল, হাতে লালবর্ণ রেখা দেখা দিল। পেশীতে বেদনা, জালা করা ও বেদনা সমস্ত হস্তে বিস্তৃত হইয়া-

গেল। বগলের গ্রন্থি ক্ষীত মাথাধরা, বমনোদ্রেক ও বমন। শরীরের তাপ ১০২ ডিগ্রি। নাড়ীর গতি ১০১।১০ হইতে লাগিল।

চব্বিশ ঘণ্টার মধ্যে রোগীর অবস্থা অনেক ভাল, পরে ৩য় ডাইলিউশন তিন ঘণ্টা অন্তর দুই দিন দেওয়া হইল। ক্রমেই উপকার বোধ হইল এবং পাঁচদিনে রোগী সম্পূর্ণ সুস্থ হইয়া উঠিল।

৩। রোগী পঞ্চাশ বৎসর বয়স্ক পুরুষ। জিনিস পত্র প্যাক করিতে পদের একস্থানে পেরেক বঁধিয়া যায়। পরদিন আহত স্থানে কর্তন ও জ্বালা করার মত বেদনা আরম্ভ হয়। পরে বমনোদ্রেক, বমন, এবং দুর্গন্ধযুক্ত মলত্যাগ হইতে থাকে। মাথাধরা, শরীরের তাপ বৃদ্ধি, আহত স্থানের চারিদিক লাল হইয়া উঠা এবং শেষে অত্যন্ত দুর্বলতা প্রকাশ পায়।

আসেনিক ভিন্ন ভিন্ন ডাইলিউশন প্রয়োগ করিয়া কোন ফল পাওয়া যায় না। পরে ল্যাকেসিসও দেওয়া হয় তাহাতেও উপকার দর্শে নাই। ক্ষত স্থান পচিতে আরম্ভ হয়। বেদনা এত অধিক হয় যে রোগী কোন মতেই স্থির হইতে পারে না। আহত স্থান স্পর্শ করিলে যন্ত্রণা অতিশয় বৃদ্ধি হয়। একিনেসিয়া অমিশ্র আরক ২০ ফোঁটা এক গ্লাস জলোদয়া প্রত্যেক ঘণ্টায় এক চামচা দেওয়ার ব্যবস্থা করা হইল এবং ঐ ঔষধ ক্ষত স্থানে লাগাইতে দেওয়া গেল।

ঔষধ প্রয়োগের অল্প সময় পরেই উপকার আরম্ভ হইল এবং দুই সপ্তাহে রোগী সম্পূর্ণ আরোগ্য লাভ করিল।

অত্যন্ত ঔষধের মধ্যে আসেনিক, অর্গিকা, ক্রোটেলস, পাইরোজিন, এবং ল্যাকেসিসের লক্ষণাদির সঙ্গে একিনেসিয়ার লক্ষণের অনেক মিল আছে।

ডাক্তার হারমেল বলেন এই সমুদায় ঔষধে উপকার না পাইলে একিনেসিয়া দিয়া দেখা উচিত।

সুবিখ্যাত ডাক্তার এইচ, সি এলেন বলেন, এই প্রকার পীড়ায় এন্ডার্সন এবং পাইরোজিনিয়মে বিশেষ উপকার দর্শিয়া থাকে। এই দুই, ঔষধেও কার্ব-কাল, ম্যালিগণেন্ট পশ্চূল এবং সেপটিক পয়জনিং জনিত রোগ উপশম হইয়া থাকে। ইহাদের লক্ষণেও অতিশয় জ্বালা ও ক্ষত স্থান লাল বা নীল বর্ণ হইতে থাকে। আমরা এই ঔষধের লক্ষণাদি শাস্ত্রই লিপিবদ্ধ করিয়া আমাদের পাঠক-দ্বিগকে প্রদান করিব। আমাদের দেশে প্লেগ রোগীর মধ্যে অনেকের বিজ্ঞবো

হইয়া থাকে। এই বাগীর চারিদিক যদি লালবর্ণ বা নীলবর্ণ হইয়া যায়। জরের তাপ অত্যন্ত অধিক থাকে, সর্কশরীর বেদনা দৃষ্ট হয় বিশেষতঃ শরীরের পেশা সমুদায় বেদনায় অধিকতর আক্রান্ত হয়, বিকৃার অবস্থা প্রকাশ পায় এবং রক্ত দূষিত হওয়ার লক্ষণ সমুদায় দৃষ্ট হয়, মলত্যাগ হয় তাহা পাতলা ও অতিশয় দুর্গন্ধবিশিষ্ট থাকে। নিদ্রালুতা ও অত্যন্ত দুর্বলতা উপস্থিত হয় তাহা হইলে এই ঔষধ প্রয়োগ করিয়া দেখা যাইতে পারে।

প্রেগ রোগে অনেক রোগী প্রথম হইতেই নিদ্রালুতার চিহ্ন প্রকাশ করিয়া থাকে সেই রোগীর আরোগ্য হইবার আশা বড় অধিক থাকে না, রোগী ক্রমে গভীর নিদ্রা (কোমা) দ্বারা আক্রান্ত হইয়া জীবন ত্যাগ করে। এই অবস্থায় আমরা ক্রোটেলেস্ ল্যাকসিস প্রভৃতি দিয়া থাকি। ইহাতে উপকার না হইলে একবার একিনেসিয়া প্রয়োগ করা যাইতে পারে।

ভয়ঙ্কর-গুণাবলী ।

(১) ক্যাস্ফর—অল্প সময়ের মধ্যে ই টি কনিয়ার দোষ নাশ করে। ইহা দ্বারা উক্ত দোষে দূষিত অনেকগুলি রোগী আরোগ্য লাভ করিয়াছে।

(২) নক্স-ভ—কটু, তিক্ত, কষায় সমন্বিত ঔষধাদি প্রযুক্ত হওয়ার পর সেই রোগীতে ইহা দ্বারা বিশেষ উপকার পাওয়া যায়।

(৩) হেপার—পারা অথবা অন্য কোন ধাতব দ্রব্যের অপব্যবহারের পর ইহার প্রয়োগ সর্বদা যুক্তিযুক্ত।

(৪) ভিরেট্রুম্-ভি—ডাঃ কিচেন এই ঔষধের ঔষোগে পিউরপিয়াল কন্ভল্শন্ (Purpural convulsion) আক্রান্ত অনেকগুলি রোগীকে আরাম করিয়াছেন।

(৫) সিলিকা—ডাঃ ম্যাকমানস্ বলেন, আগষ্ট মাসের শেষ সময় যে হাঁপানি দেখা দেয়, (Haysthma) তাহাতে ইহার প্রয়োগে আশু কল পাওয়া যায়।

(৬) আঙ্গুর—২০০ শত ক্রম ব্যবহারে রস-টক্স বিষের দোষ দূরীভূত হয়।

(ক্রমশঃ)

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নূতন ভৈষজ্য-তত্ত্ব ১৮৯৮ সাল।

শ্রীরাধাগোবিন্দ কর এল, আর, সি, পি, কৃত।

১৯৯৮ সালে নূতন ব্রিটিশ ফার্মাকোপিয়া প্রকাশিত হইয়াছে ইহাতে
অনেক ঔষধ দ্রব্য ও প্রয়োগরূপ গৃহীত, পরিভাষা ও পরিবর্তিত হইয়াছে ;
ফলতঃ এই ফার্মাকোপিয়া একটি সম্পূর্ণ নূতন জিনিষ দাঁড়াইয়াছে। ষাঁহাদের
১৮৮৮ খৃঃ অব্দের দশম সংস্করণ হইতে শেষ সংস্করণ পর্যন্ত ভৈষজ্য রত্নাবলী
বা ষাঁহাদের সংক্ষিপ্ত ভৈষজ্য-তত্ত্ব দ্বিতীয় সংস্করণ অথবা ষাঁহাদের অন্তর্গত যে
প্ৰকান নেটিরিয়া মেডিকা আছে, তাঁহাদের এই পুস্তক থাকিলেই সকল অভাব
দূর হইবে। ডাক্তার ও কম্পাউণ্ডার সকলেরই এই পুস্তক অত্যাৱশ্যক।
মূল্য ১১০ টাকা, মাণ্ডলাদি ১০

শ্রীগুরুদাস চট্টোপাধ্যায়।

বেঙ্গল মেডিক্যাল লাইব্রেরী,

২০১ নং কণওয়ার্লিস্ স্ট্রীট, কলিকাতা।



১২নং বনফিল্ডস লেন, —কলিকাতা।

তিন দিন বেরূপ হোমিওপ্যাথিক চিকিৎসার উন্নতি হইতেছে, হৃৎকের বিষয় হোমিওপ্যাথিক বিশুদ্ধ ঔষধ প্রস্তুতের প্রতি সাধারণের সেরূপ লক্ষ্য নাট। অনেকেরই সন্তান প্রতি দৃষ্টি। তাহাতে ঔষধ ঠিক হটক আশ নাই হটক সন্তা হইলেই হটল, কিন্তু হোমিওপ্যাথিক চিকিৎসার কৃতকাৰ্য্য হইতে হটলে বিশুদ্ধ ঔষধই একান্ত প্রয়োজনীয়। প্রকৃত হোমিওপ্যাথিক ঔষধ বাহাতে সকলে সহজে পাইতে পারেন ও মফঃস্বলবাদী খরিদ-দারগণকে সন্তান প্রলোভনে প্রলোভিত হইতে না হয়, এই সঙ্কে প্রায় ২ বৎসর হইল আমরা লণ্ডন ও আমেরিকার প্রধান প্রধান হোমিওপ্যাথিক ম্যানুফ্যাক্টরি হইতে উৎকৃষ্ট ঔষধাদি বিস্তার অর্থ ব্যয় করিয়া আনাটরা—স্বতন্ত্রভাবে ও স্বতন্ত্র স্থানে বহুদর্শী ও ধর্মভীক কার্য্যার্থক্যের পরিচালনা এক হোমিওপ্যাথিক বিভাগ খুলিয়াছি। কলিকাতার প্রধান প্রধান হোমিওপ্যাথিক ডাক্তারগণের তত্ত্বাবধানে এই হোমিওপ্যাথিক হল পরিচালিত হইতেছে। ডাক্তার চন্দ্রশেখর কালি আমাদের প্রতি অগ্রহ প্রকাশ করিয়া ঔষধের বিশুদ্ধতার প্রতি সাক্ষ্য দৃষ্টি রাখিতেছেন। প্রতি সপ্তাহে বিলাত আমেরিকা প্রভৃতি স্থানের প্রধান প্রধান ঔষধালয় হইতে ঔষধ আনান হইতেছে। এই সুব্রহ্ম হোমিওপ্যাথিক ডিপার্টমেন্টের জন্য বহু বাটী প্রস্তুত করা হইয়াছে। সাধারণের প্রতি সাহসের পার্বনা তাঁহার অগ্রহপূর্বক যেন আমাদের এই হোমিওপ্যাথিক হলটি স্বচক্ষে পরিদর্শন করিয়া যান।

সেখনীয় ঔষধের মূল্যের হার।

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ডাম ১/৫ (হাজার টিউব শিশি) ,

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ড্রপার পুস্তক ও ক্যাম্ফর সহ ১২, ২৪,
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২, ৩, ৩ ৪, ৫, ৬, ৭, ১০,
টাকা ।

TO LET.

THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.]

MAY 15, 1904.

[No. 5.

The So-called Homeopathic Physicians.

In many parts of the world there appear at the present day a good number of the so-called homeopathic physicians who have even no idea of what does homeopathy consist in. They write books and send papers to the Medical Societies which have not the inkling of the homeopathic principles in it. In one of the great Associations a gentleman wrote a good deal about the treatment of puerperal infection in which not a word is said about the therapeutic value of any of our efficacious remedies under such conditions.

He writes pages on the descriptions of the disease, its pathological speculations, diagnosis and prognosis but nothing about the therapeutic resources peculiar to homeopathy. He said about the surgical measures, whiskey, strychnia sulph, $\frac{1}{30}$ of a grain every four hours, saline injections, various hypodermic injections and so forth.

These things have been used and experimented upon by our old school friends times without number, but with no appreciable

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effects. It is beyond our comprehension how and why these absolute things have been early taken up by our men in the new school of medicine. It is a pity they do not know how to use the invaluable treasures accumulated and stored up for us by illustrious Hahnemann. These so-called homeopathic physicians have their brains infected by bacteriological fads and in their confusion of mind they find nothing to fall back upon, in the resources of homeopathy.

We have repeatedly seen the evil effects even the murderous effects of strychnine injections in various cases of disease. In a case of the low form of remittent fever, injection of strychnia was followed by difficulty of breathing and tetanic rigidity of the muscles of mastication. Timely intervention of homeopathy fortunately rescued the man from certain death.

Another gentleman wrote a book, a big monogram on the diseases of the kidney and urinary organs generally. In that book very little has been written on the real homeopathic therapeutics of the disease. He has many allopathic formulas for injection and external applications included in that work without much indications of our remedial measures. For what purposes the homeopathic students of our colleges and our physicians would care to buy that book, if they want to know something of pathology and other matters about these diseases and even the allopathic treatment they can do well to buy some allopathic works on the subject. For our part we can say when a work on any subject from a homeopathic author comes to our hand, we expect to get something new therein about the therapeutic resources of that disease.

Homeopathic physicians should know that we have a treasure in our hand which is far more valuable and far more enduring than the transitory, glittering, and easily vanishing things in the camp of the allopathic doctors. Do justice to your own cause and you will be better rewarded.

Plague.

Plague has again broken out in great virulence in our city. This year as also on previous occasions the lower class of the people are generally attacked, particularly those that inhabit the dirty localities and overcrowded tenements. Seldom do we find a case among the better class of the people. But when we do find such a case it generally takes on a very serious type. Two years ago, one of the plague doctors of this city was attacked and he died in a very short time in spite of the very best of treatment. One of our friends a local allopathic physician also died from the effects of this malady. I have myself treated many cases but as yet have escaped the infection.

The disease generally breaks out in unhealthy localities whence it spreads all over the place. It is sometimes very difficult to trace the origin of cases that we find among the better class of people who also live under better sanitary rules. The only way we can account for it is that the poison is carried there by the servants who are generally found in large numbers in such houses. They perhaps go to their huts at night and in the morning come to their work without taking much pains to clean their hands or body or change their clothes.

The onset of the disease is very uncertain. Some cases begin with a low type of fever from which the patient suffers for some days, when the bubo makes its appearance. Then fever rises higher, the pulse becomes frequent and irregular, brain symptoms supervene and the patient dies of heart-failure. Then again there are cases where the man comes home from work practically hale and hearty, complains of exhaustion and headache, in a couple of hours the temperature goes up as high as 106-107, the inguinal, axillary or the cervical glands become enormously swollen, coma supervenes and death ensues. The bowels generally remain open and the

urinary secretion also remains normal. A very marked feature in plague cases, one that is almost always met with, is the constant fluctuation of temperature. Just now you see it is 105, an hour later it is 102, again an hour afterwards it is found to be 105 or 106. "Brain is always affected more or less before death. Drowsiness is always a very bad symptom. Another feature that I have found in many cases is the apparently apathetic condition. The patient says he is all right when his symptoms appear to be very grave to the doctor. He says he has nothing the matter with him ; he feels all right. Those cases that linger for many days and where the heart remains unaffected generally get well. If the buboes go on to suppuration, the patient generally recovers.

Now a few words may well be said as regards the medical treatment of this disease. Our friends the allopaths have practically no treatment for this disease except the microbe killing rage or rather the antiseptic treatment. They try to keep up the strength by giving the patient brandy and strychnine and keep the brain cool by applying ice bags to the head. The result of this treatment has been very futile up to the present time.

As regards the homeopathic treatment of this disease I have followed the thoroughly Hahnemannian method of treatment. Many new and out of the way remedies have been recommended by many physicians and I have also seen some of them used but their effects so far have not been very satisfactory.

There are no specifics for this disease in homeopathy. The totality of the symptoms is the best guide here as anywhere else in homeopathy.

I will not try to detail all the remedies that may be useful in this malady, but will enumerate a few that have been useful in my hands. Last year I cured several cases with *Rhus tox* and *Mercurius*. Generally speaking *Rhus* is more useful

when the fever is the predominating feature, where there is great restlessness, but where the buboes are not very painful. Mercurius is effective if the bubo tends to suppurate and is very painful. With it we generally have a sticky perspiration that is very exhausting. A moist skin with great heat is also a good indication of Belladonna, but here the brain is principally affected and generally the head symptoms are pronounced. Ignatia is a remedy that has been very highly praised of by our late venerable colleague Dr. Mahendra Lal Sircar but as yet we have no clinical record to testify its efficacy in cases of plague. Dr. Raue speaks well of this remedy in blood poisoning and in diphtheria and from analogy we might deduce that it will be efficacious in plague also. Our friend Dr. D. N. Ray speaks well of Loimine or Buboninum having had good experience with it. Baptisia is well worth a trial where there is diarrhea and the depression is great from the beginning. I have had good experience with Ant Tart, Calc Ars and Lachesis in very serious cases.

Dr. P. C. Majumdar speaks well of such remedies as Bell, Rhustox, Pyrogen, Dulcamara, Fer. Phos, Kali Mur and Phosphorus at the commencement. If the brain is the principle seat of the mischief he thinks well of such remedies as Bellad, Naja, Strammon, Opium, Nux Mosch, Ailanthus and the like. If however the mischief appear to be more in the heart then Acon, Calc Ars, Naja, Crotalus, Kali Phos, Hydrocyan Acid, Digitalis, Morphinum etc. should be thought of.

Echinacea as suggested by our friend Dr. G. L. Gupta may be tried according to indications. Spr Nitr Dil is a remedy that has many symptoms of plague. In Hering's little book on typhoid fever I found its principal indications. I used it in some cases last year.

A book that has been a "friend indeed" in times of danger is that little book of Nash :—"Leaders in Typhoid Fever."

Barley water, gruel, milk and soda, diluted milk are good

things as diet. Meat preparations are injurious. Stimulants should never be used. Ice may be given in small quantities to quench the thirst.

J. N. Majumdar, M.D.

What Should a True Homeopath Learn and Unlearn.

A true homeopath should not treat his patients accordingly to the names of diseases, which is quite unscientific. For our great illustrious master Hahnemann says that nomenclature of pathological names is absolutely unnecessary. Is it justifiable to base medical science on mere names? (Vide Sec 80 of the Organon).

Though he repudiated the doctrine of pathological lesion as a fruitful source of deception, yet the study and analysis of pathological changes after death seem to exercise a powerful attraction on the most gifted medical minds. Dr. C. J. Hempel says, "Why is this? Why should a man like Rokitansky be willing to spend his life among cadavers, amid the ruins of the dissecting room? Certainly not to act the part of an intellectual load-carrier, but because he honestly fancies that these dissections and microscopical examinations of the diseased organs may lead him to a more accurate and more intimate knowledge of the nature of the disease. The method may be faulty, but the aim is noble and the arduous labours of such a man are eminently deserving of the commendation of our school. Gentlemen, a man may be a leading pathological anatomist of the age, yet he may be a poor physician; a man may be a great physiological chemist, and yet a most unsuccessful practitioner; a man may be a second Cruveilhier, and yet lose more patients than his unlearned

colleague who only has a general knowledge of the main facts of anatomy ; a man may be a most learned pathologist, and yet make exceedingly inadequate prescriptions "

Dr. Frank Brunen, M. D., Chicago, in the *Homeopathic Recorder*, November 15, 1903, Vol XVII, No II, says that:-- If a prescription is made on pathology or morbid anatomy, it is more or less of an accident, if it should prove to be a good one.

There are reasons for this. The *Materia Medica* has not been founded on pathology, but on symptomatology. True enough we can often make a fair prescription on grosser morbid anatomy at times but it is very uncertain and more unnecessary.

In symptomatic prescribing we are guided by nature's interpretation which is unerring, and we should be heartily ashamed of ourselves to presume that we can make a better interpretation than that made by nature.

To be continued.

N. H.

A Marvel in Surgery.

PINCHING THE HEART.

AMERICA is the land of marvels, but its surgeon cannot teach much to English practitioners.

The *Daily Chronicle's* correspondent at Philadelphia stated recently that Dr. Keen had described "a new method of restoring respiration in cases where other methods have failed." The "new" method consisted of exposing the heart of a patient who was apparently dead and gently squeezing and relaxing the organ until respiration had been induced. Dr. Keen, it was added, had been successful in four out of twenty-seven cases in which he had resorted to this heroic measure. The same during operation has been successfully performed

in this country, as far back as 1891, the only difference being that the heart was not exposed by a cut of the surgeon's knife, but was worked upon internally. A West-end practitioner who has seen much surgical work at Guy's Hospital, described this operation to a representative of the *Daily Chronicle*. The patient was being operated upon for cancer under an anæsthetic. The stomach had been laid open, and the surgeon was proceeding with his work when suddenly the heart dilated and ceased to beat. In an instant the surgeon's hand was thrust inside the body, and he commenced pinching the heart. It began to beat again, and the life of the patient, who was apparently dead, was saved. The incident was remarkable, not only for the operation on the heart, but for the cutting open of the stomach, which was a serious undertaking for a surgeon in 1898. The second operation was conducted in the same way, but it is uncertain whether the third was performed in the manner of Dr. Keen, by laying open the chest, or by pinching the heart from within. The essential point is that all three operations were successful. There is a record of at least one similar operation at Westminster Hospital. The anæsthetic which had been administered prior to the application of the knife, had in each of these cases given a shock to the patient which had suspended the beating of the heart. The heart of a frog will stop under the same condition, but, if the animal is given a smart tap over the intestines, the action of the organ is resumed. This is not the first occasion on which a startling medical or surgical discovery has been announced from America. Adrenaline, for instance, which is an extract of the suprarenal gland, and very powerful in the stopping of bleeding and for other purposes, was announced from America as a "new" thing so me considerable time after it had been known in this country. There are some who think that the marvels of surgery are at an end. There is one London surgeon who holds a different opinion. He has devised apparatus by

which he thinks he can perform a saving operation in the case of contracted valves of the heart. His proposal is to stop the obstruction to the passage of the blood by slighting the valves, and he believes his instruments can effect this purpose with safety. As yet he has found no physicians who will entrust him with a patient for operation. It is not that they believe the operation too dangerous in the interest of a human life but they are not convinced that it is the right process.

Statesman.

Cases from Practice.

By J. N. Majumdar, M. D.

Capillary Bronchitis. *Ipecac 30.*, S. N. D's child 8 months old was attacked with capillary bronchitis: when I saw him, his chest seemed full of mucus, loud râles were heard all over the chest, the difficulty of breathing was marked and the child was getting cyanosed. The respiration was hurried and the fever high. He was under the treatment of a local homeopathic practitioner who had tried many medicines. Bell, Ant. Tart and Opium had been tried in vain. *Ipecac 30* every three hours. I saw him in the morning. In the evening the report was that the child was decidedly better. His respiration was better and he was sleeping quietly. Placebo during the night. The next morning the temperature was normal, loud râles were still heard but the respiration was much easier. The child made a complete recovery without the intervention of any other remedy.

Plague, *Hyosc 30.*—M. N. B. was attacked with high fever with enlarged glands in the inguinal region and was placed under allopathic treatment. In 48 hours he was no better. His temperature was 103 the first day, the next day it was 104 and when I saw him it was 105. He was groaning con-

stantly. The bubo was enormously swollen and he was slightly delirious. The allopaths had applied leaches to the bubo and icebags to the head. All this was discarded. Bell. 30 every 3 hours. No improvement.

In the evening Hyosc. 30 two doses every three hours. The next morning the temp. was 101. The patient much more comfortable than on the previous day. No delirious talks. The bubo seemed to be in the same state. There was occasional throbbing in the parts. I gave a few doses of Merc. Sol for this but to no effect. The fever rose to 102.6 in the evening but went down again the next morning. The bubo seemed to be coming to a head. Hepar S. 30. In three days the bubo burst of itself, the fever went down and the patient was cured, but for the sinus which remained and for which he received occasional doses of Silicea 30.

A right diagnosis, Puls 30.—This was a case of suppression of the menses with violent colic and bearing down pains. The patient had kabirajee treatment before he was placed under homeopathic treatment. She continued under the treatment of a well-known homeopath for two weeks before I was called. The pains were intermittent in nature, would begin in the small of the back and would spread all over the abdomen and cause a violent bearing down. She would be compelled to pass water frequently and suffer an excruciating agony for sometime.

When she would keep well for an hour or so and the pains would return again. The pains would come on gradually and would ultimately become unbearable. The doctor who attended previously had thought it to be a case of renal colic and prescribed Nux Vom, Apis, Lycopod. &c without any benefit whatever.

In taking her case I found that the previous doctor had never enquired about her menstrual functions in spite of the fact that the menses were entirely suppressed for two months.

She was about 20 years old. First I prescribed *Cocculus 30*, but this had no effect. Then *Pulsatilla 30* was given. The pains were checked, and she made a complete recovery in a short time.

Gastric neurosis, *Phosph 30*.—R. L. D's wife was attacked with indigestion and malarial fever for sometime. She had all sorts of treatment without any benefit. She was very much reduced in health when I was called. She was a tall, stoop-shouldered girl of 18 years with a family history of tuberculosis. She suffered from a slow fever that generally came in the afternoon, rose to 100.2 by night and left in the morning. The bowels were rather constipated. The lungs revealed no abnormal sounds except perhaps a slight weakness. Her most distressing symptom was a constant vomiting, she could retain nothing in her stomach. Anything she took in the shape of nourishment was sure to come out in a little while after eating. There was no burning or any other discomfort. The region of the stomach was slightly painful on pressure. *Nux. Vom.* and *Sulphur* were tried in vain. *Phosphorus 30* promptly checked the vomiting.

Cough, *Coral Rub 30*.—H. G's son about 8 years old was suffering from a violent concussive cough that lasted only for a short time but was very distressing. There was also a family history of phthisis pulmonalis. *Drosera*, *Rumex*, *Bryonia* and *Calcarea* were tried in vain. It ultimately yielded to *Coral Rubrum 30*. H. took about 12 powders when he was completely cured.

Mammary Cancer, *Acid Nit* and *Hepar Sulph*.—An old lady came to me for the treatment of her breast that was very hard and full of nodes. One of these nodes had suppurated and was opened by a local doctor, but the sore instead of healing had gone on increasing when the doctor had declared it to be a case of cancer and had advised her to go to hospital and have the breast removed. When she came to me the

wound was about 2 inches in diameter, it was deep in the middle with elevated edges. A lot of unhealthy pus came out every day. The adjacent parts were still very red. I advised her to have it washed with boiled water every day and apply olive oil and keep it covered, and gave her Acid nit 30 twice daily for six days. When she came back after that time I found the sore to be much more healthy and the pus also had a very healthy look. She made a complete recovery under Acid Nitr and Hepar S. in a month's time. I gave Hepar S. in the end because the pus continued to come out in great quantities even when the wound had practically healed.

Liver Abscess, Apis—K.B.G. was attacked with an inflammation in the hepatic region which had threatened suppuration when he came to us. The liver was greatly enlarged and very sensitive to touch. There was a slow fever all the time, and there was also a slight doughy feeling in one or two spots. His bowels were constipated and he had a cachectic look. He had been a hard drinker in his days. Nux. V., Bryonia and Mercurius were tried, but ultimately he made decided improvement under Apis 30. Two doses of Apis 200 at the interval of a week's time cured him completely.

Carbuncle, Arsenic—S. B's wife was attacked with a carbuncle on the thigh. When I saw her she had high fever, was very restless, and there was great burning. The pain in the leg was very severe so much so that she could not move her leg at all. The inflammation was about 6 to 8 inches in diameter and it had the true honeycombed appearance. The urine analysis report showed 25 grains of sugar to the ounce, which no doubt was prostrating her a good deal. The surgeons had told her husband that nothing but a radical operation could cure her.

Arsenic 30 took away all the pain and suffering and reduced the fever. I believe it also reduced the quantity of sugar in the urine.

She also received a few doses of Lach, Hepar and Silicea and was completely cured in about a month's time.

Renal Colic, *Berberis*—B. S. was attacked with a violent pain running from the kidneys down the ureters. When the pain came on the patient would suffer excruciating agony, would be compelled to pass water frequently which came out with great difficulty and then only little at a time. This had made his loins and back very sore. *Berberis* 3x three times a day. The pains were greatly mitigated after the second dose the very first day. After three days he came to me saying that he was completely cured and showed me the gravel that he has passed after taking the medicine about six times. He said it had caused him much pain in expulsion but that it had relieved all the pains afterwards.

Status of Homeopathy.

The following as published in the report of the American Institute of Homeopathy shows the status of homeopathy in the different countries and also the attitude of the regulars in those countries towards the homeopaths:—

In Denmark, Homeopaths had the right to dispense their own medicines until 1886; since then they have been obliged to write prescriptions. Into its medical society they are not received, though they have passed an examination at the University as general practitioners. But when an allopath becomes needy or bankrupt, money is solicited from them at once, and they are addressed as "Dear Colleague". When a sick club employs homeopathist, the old-school physicians resign their positions. The State gives nothing to homeopathic hospitals. "Denmark in this respect is not a land of Freedom"

In England the new school has equal rights with the old. It suffers not from the written law, but from the *unwritten*. The "Royal College of Physicians acts as a kind of trades union." It does not allow its members and fellows to meet homeopaths in consultation. "We are strangled by vested interests." All medical chairs are kept in allopathic hands by election.

In France the obstacle to the growth of the new school is the extreme centralization of public teaching. As all lecturers are allopaths, no homeopath can hope to be received as one. Should a lecturer become a homeopathist it would not help the cause, as other lecturers would refuse to graduate his pupils. With our medical colleges at Lille, the Minister of Public Instruction does not interfere, as the students are examined by a mixed board, one-half of which, with its president, are state lecturers. The practice of all physicians is becoming more and more like homeopathy, but the discoveries are attributed to Professors B. and X, instead of to Hahnemann.

In Hungary there are no laws that hinder homeopathy in its scientific development. Practising physicians are obliged to write prescription.

In Italy doctors duly qualified may follow any therapeutic system preferred. Homeopathists may dispense medicine gratis in places where their special pharmacies are not found.

In India there is no law for or against homeopathists as regards the right to practice, but the government has no sympathy with them, even their sick certificates are refused recognition in courts, though the certifying homeopathists be a graduate of a government recognized medical institution.

In Russia *legally* no preference is shown to either school, though homeopathists labour under enormous disadvantages, all government medical posts being occupied exclusively by allopathists. "But according to a statute of the Committee of Ministers confirmed by His Imperial Majesty, the Emperor, on the 28th day of January, 1899, the right of Crown service is granted to physicians and other officials serving the hospitals and dispensaries of the Charitable Society of the followers of Hahnemann. This right was procured through the Minister of the Interior.

In Switzerland there are no laws against homeopathy and none for it. Physicians must be old school doctors; and then they are free to practise as they like. Strictly speaking, homeopathists have no right to dispense their remedies, but they do, and as yet there has been no opposition.

In Tasmania there is state legislation that interferes with the practice of homeopathy. Foreign diplomas are on the same footing as those furnished by the Royal College of Surgeons of England. Ordinary practitioners, however, will not meet homeopathists in consultation nor give them any assistance whatever, yet homeopathy enjoys the confidence of the public. Both doctors and pharmacists are well patronized. They

have a hospital of their own in the south and in the north, a strong association, and until recently have issued a monthly journal which was discontinued only when it may have been said to have served its purpose.

Editorial Notes.

From the current month the *Indian Homeopathic Review* will be published in two separate numbers. The English number will contain 32 pages of reading matter besides advertisements &c. The Bengali number will contain 24 pages. We have often been requested by our foreign subscribers and contemporaries to increase our reading matter in the English portion, but for such a long time we have not been able to do anything in this direction, for the want of proper management, but through the able management of our present enterprising manager we have at last been able to accomplish that task. The reading matter in the Bengali portion has also been increased and will contain many interesting subjects.

The Report of the American Institute of Homeopathy of the last session is just to hand. It is a neat little book and contains much interesting information and many nice and readable articles. We shall try to publish some in our next issue.

Dr. D. N. Ray has left Calcutta for Darjeeling, to give his tired nerves some rest. This is the doctor's annual privilege leave.

Dr. S. C. Dutt, L. M. S., a distinguished graduate of the Calcutta Medical College and a staunch homeopath has joined the Calcutta School of Homeopathy.

There was a very pleasant gathering at the residence of Dr. C. S. Kali on the occasion of the marriage of his daughter.

Dr. N. N. Sett one of the ablest of the contributors to the pages of this Journal is about to be elected a member of one of the great American Societies.

Dr. P. C. Majumdar leaves Calcutta for Darjeeling next week. Many new and interesting articles are expected from him for the next number, for the doctor will have much time while in the hills.

We are glad to hear that Dr. B. B. Chatterjee has again joined the Calcutta School of Homeopathy.

Dr. W. Younan has gone to Kurseong to recoup his health. We are glad to hear that the doctor has thoroughly recovered from his recent illness.

A new Bengali book has just been published by the Bengal Medical Library. The *Homeopathic Chikitsashar* is from the pen of Dr. J. N. Majumdar and is in the lines of Dr. Dewey's work on "Practical Therapeutics."

Many interesting cases are seen in the Bhaduri Charitable Dispensary during the Clinic hours of Dr. A. N. Mukerji

Gleanings.

By A. N. Mukerji, M. D.

Adrenalin and Glycosuria :—

The author found that when adrenalin is injected into rabbits whether in the veins or subcutaneously glycosuria appears. The supervention of fever, however, causes the sugar to disappear from the urine, although presence of advanced organic disease may prevent this action of febrile process.
—E. Aronsoh.

Radium in Therapeutics.

Radium does not act as quickly and satisfactorily as the Roentgen Ray. Experiments made by others and the writer indicates that radium is of special value in removing birth marks. Most of the reports in the press in regard to wonderful cures effected by it are exaggerated, especially is this true as regards cases of blindness. At the same time it is

of great service in demonstrating to the surgeon whether or not the optic nerve is destroyed or whether an opacity of the pupil exists.—Robert Abby in *Boston Medical and Surgical Journal*.

X Ray treatment of Sarcoma.—The use of X Ray in cancer should be limited to recurrent and inoperative cases, with the sole exception of small superficial epitheliomata of the face. Even here the author believes the results of incision will prove to be better and more lasting, save in the proximity of eyelids and nostrils. It is most misleading to report as cures, cases in which malignant tumors have merely disappeared under the influence of X ray, since speedy return is the rule rather than the exception. At the present moment there is no evidence to prove that any permanent cures have been obtained save possibly in the case of rodent ulcer.—W. B. Coly in *Medical News Feb. 1904*.

Cowley's ten commandments for the treatment of Fractures.

- (1) Set and dress early unless contra-indicated.
- (2) Apply no preliminary bandage.
- (3) Only apply temporary dressings when permanent dressings are impossible.
- (4) Immobilize the broken ends and the two adjacent joints.
- (5) Pad splints well, specially about projections.
- (6) Bandage snugly, but not tightly enough to interfere with circulation.
- (7) In bandaging the extremities, always leave fingers and toes free for inspection, as they serve for guides as to the circulation and the position of the part.
- (8) Let comforts be the guide.
- (9) See the patients early and often, but dress rarely (Every 3rd or 4th day).

(10) Make passive motion when fracture is near a joint, otherwise they are useless. Make active and passive motions when tender sheaths are involved.

Give what might be called the eleventh commandment—*Be gentle*.

Binding headaches. Chronic headaches are frequently accompanied or preceded by blindness and the following six drugs will most often be indicated.

Kali Bich—Blindness preceding headache, but it disappears as headache grows worse (*Causticum* on the other hand does not diminish).

Silica. The blindness comes on after the headache. *Gelsium, Iris vers, Natrum Mur* and *Psorinum* completes this group.

Babies that sleep all day and cry all night are frequently cured by *Lycopodium* (*this will be good news in many homes*).

Dont forget to think of *Chelidonium* in Capillary Bronchitis complicating measles.

In constipation of baby-food-fed babies, *Alumina* is often the remedy.

Harassing titillating cough in children—Not at all in the daytime but beginning as soon as their heads touch the pillow at night (*Drosera*). *Conium*—The same, but the cough is also troublesome during daytime.

Chill occurring at 10 A.M. result of hectic fever or phthisis, will yield to *Stannum*.—*O. E. Hains*.

Dr. F. F. Laird thinks that *Hepar Sulph.* is a curative

remedy in that protean and comparatively rare affection, *Angio-neurotic-œdema*.

A little thought of remedy in Neurotic-dyspepsia.—You should think of *Conium Maculatum* when there is a sensation of gas in the stomach without any actual presence of it there. Loud and long eructations often cultivated by habit, and the mental conjecture that he must get rid of imaginary gas. Constipation associated with hypochondriacal introspection or hysterical loss of self-control and nervous palpitation.—C. Wesselhæft, M. D.

Dr J. B. Garrison counsels the long-continued use of Bacillinum 30 or higher in simple non-adherent hypertrophy of the tonsils.

Cough with eructation.—This symptom although rather unique is not infrequently a prominent and peculiar one in the patients' fatality. It may be found in the pathogenesis of a number of remedies; but Dr. C. M. Boger says that in his experience Kali Bich and Sanguinaria are the common ones with which he has cured.—*Medical Advance*.

X—Age 40, is gloomy and melancholy, heavy slow-beating of the heart followed by dyspnoea and after a while sharp pain in the heart. It seemed to him as if the cardialgia was finally produced by the strong slow contraction. This pain was worse after eating, he belches and often vomits, his stomach distress and pain, as from a hard-boiled egg, Abies Nigra 6x was prescribed to be taken three times a day with the result that all the above symptoms cleared up within three days.—A. N. M.

Strothium Carb—Dr R. del Mas claims that his remedy is superior to our Carbo Veg. after serious operations, when the

patient is greatly prostrated, has a cool breath and when the parts persistently ooze blood. He says that Strot Carb. does for the surgeon what Carbo Veg. does for the physician.—*Minneapolis Magazine.*

A therapeutic hint from my preceptor. In the marasmus of young children, the efficacy of Abrotanum is often marvelous. The children have had dyspeptic symptoms, have eaten voraciously yet emaciation was progressive. Diarrhic stools were prominent. These have been the author's leading indication for this remedy.

Tuberculinum is indicated in dark, swarthy individuals and *Bacillinum* for fair complexioned people. — *Dr R.S.Copeland.*

According to Hahnemann Calcarea must not be used before Nit. Acid, and Sulph. may produce unnecessary complications.—*H. C. Allen.*

Natrum Salicylicum 3, every two or four hours, has relieved many cases in which symptoms of vertigo with noise in the head, have remained after influenza. Patients to whom I have given it have so frequently praised its 'tonic' effect that I have given it (and with great success) where the debility has been the leading symptom and no head symptoms have been complained of.—*J. H. Clarke, M.D.*

Dr. T. L. Shiorir, in an interesting paper, remark that occasionally he finds no other cause for the difficulty experienced by some patients in breathing through the nose save an unusual dryness of the mucus membranes. The cavities are spacious enough but the mucus surfaces actually glisten with dryness. For the treatment of these cases he has used with

much success Natrum Mur 6x and Sticta Pulmonaria 3x dilution. If any sign of the formation of crusts are present he prescribes Cal. fluor 6x.

The treatment of Bronchitis in rachitic children—The following therapeutic indications for bronchitis in rachitic children are given in Zeitschrift des Berliner Visese Homeopathischer Aerzte.

Calcarea—The general type of the Calcarea subject is body coldness, emaciation; secretion of mucus; bronchial and gastro-intestinal catarrh due to malnutrition, hyperplasia of the glandular structures, sweat about the head and chest. Urine turbid. The following lime salts are useful :—

Calcarea acetica—Chronic diarrhea. Meteorismus; swelling of the mesenteric glands. Catarrh of the Bronchi.

Cal ars—Evening fever; Emaciation, face wrinkled.

Cal carb—Fat children, joints involved, hyperchlorhydria.

Cal muriatica—Sweat about the head and chest. Marked general weakness.

Cal phos.—The most important remedy of wonderful action which manifests itself on the one side upon the joint, on the other upon the respiratory tract. It often covers the entire case.

Intercurrent remedies—Silica (general prostration) and Phos—dry cough.

Change of type in Cholera.

(Continued from page 74.)

Now in general practice one meets with the following phases of cholera.

(1) No vomiting, no purging: the patient falls into a sudden collapse and dies within a short time: on post-mortem, the intestines are found full of choleraic stools; these cases are very rare. This is known as *cholera sicca*. I saw only one case when a boy, but none as a practitioner.

(2) Spasmodic variety—The patient gets into sudden collapse, generally early in the morning; there is anxiety, restlessness and difficulty of breathing; the pulse is found to be full and tense; the heart beats are strong and painful. Vomiting and purging follows afterwards; the tension of the pulse disappears, the heart beats now become weak and the patient passes into full collapsed condition of cholera. These cases were common from the time of Hahnemann till some forty years back. Hahnemann laid down the use of Camphor in such cases: in the hands of Dr. Rubini of Naples, this method of treatment had a marvellous success. It has no success now, because the type of disease is not to be found now-a-days.

(3) Diarrhic variety—now a-days it is seen, in two forms, vomiting followed by purging and purging followed by vomiting. *Veratrum album* is a typical example of the first form; Ricinus, Colchicum, Secale and Muscarine typifies the second form. The spasmodic variety was rapid in its onset and equally rapid in its disappearance, either in cure or death. The diarrhic variety comes on slowly and takes some days before the patient dies or is cured.

(4) Paralytic variety—Rarely seen. Presently all the symptoms of spasmodic cases from the very beginning, but only there is no tension of the pulse and powerful heart beats.

We have classified cholera into four classes, but after a time when the disease has developed a little, all these cases run into the last variety, the *paralytic* one, this is the stage of collapse.

Differences in the nature of choleraic stools and the indications of medicines given thereby.

It is said, the rice-colored stools are the characteristic of cholera and all allopaths agree in it. In a large extent this is true, but cholera differs in the nature of its evacuations, as it does in its type. I have seen the following—

(1) Ordinarily whitish watery stools, which are said to be rice-colored ones.

(2) Watery stool with a greenish tinge and deposits below.
—*Veratrum*

(3) Clear, transparent watery stools, with deposits of lumps or flakes of mucus.—*Ricinus, Colchicum*.

(4) Clear transparent watery stool with or without any foul smell and with no deposit whatever.

(5) Thick, watery, bloody stool; so red is the stool that it appears as if it consists of only blood. There is deposit of mucus in it—*Muscarine*.

(6) Stools like dirty ditch water.—*Mancinella*.

(7) Stools, consisting of brownish red fluid looking exactly like the stool of *Psorinum*. A few years before, I have heard of twenty cases of this nature in a particular locality of Calcutta, all coming into the hands of a homeopathic practitioner and all ending in death. I have seen only one such case and cured it by *Psorinum*.

The medicines mostly used in cholera in the very beginning must be carefully differentiated and such differentiation often proves difficult.

Veratrum presents a type not to be found in others. Both the vomiting and purging (the rice-colored stools are abilious) are greenish tinged, showing the presence of bile. Body ice cold and early collapse; cold debilitating sweats all over especially the forehead. Great thirst from the very beginning for large draughts of water. *Vomiting first followed by purging* (Reverse in *Ricinus* and *Colchicum*). Pulse very soon becomes weak and thin, voice husky.

Twenty years before, one would find a good many cases of cholera, indicating *Veratrum*, but hardly a case now.

Veratrum is the medicine chiefly used, but in cases of morning aggravation, *Veratrum viride* is preferable.

B. B. Maitra. M. B.
To be Continued.

Notes on Materia Medica.

1. *Kali Carb* :—

It is prepared by solution in distilled water, or by trituration.

In old schools Therapeutics, we see no mention of any specific action of its own—the only exception being *whooping cough*, where it has some reputation. According to Bonninghausen it is *specially indicated where there was much puffiness of the upper eye-lids present*. Dr. Drury recommends it also in cough from relaxed uvula. We see the chief sphere of its action is in affections of the respiratory organs. In ulcerations of the nostrils, *ozæna*, or rather the chronic nasal catarrh, it has been found to be useful, the indication being the presence of ulceration within the nose. As with *Stannum* the chief indication for it is *profuse purulent expectoration* but also with a peculiarity of its own, *much pain in the walls of the chest*, for which it is considered as a true remedy for *pleurisy*. It is also somewhat beneficial in *pneumonic Phthisis*.

Next to the respiratory system it affects the ovario-uterine system. Hahnemann commends it in *suppression of the menses*, or when these *delay in making their first appearance at the time of puberty*. But Dr. Gullon recommends it also in *menorrhagia*. It is highly spoken of, for *aching in the back*, with sense of weakness there, *in pregnant women* and for the effects of *want of care after miscarriage and child birth*.

In addition to these important points of action, it is also of use in the treatment of *complex cases of chronic diseases*.

"Stiching is the most characteristic of Kali", remarked Hahnemann himself and Dr. Guernsey says the removing of the sharp, stitching, jerking pains from the chest walls, is the key-note of this medicine.

From this it will be seen, that *Causticum* is not a close analogue of this medicine as their chemical relationship would suggest, but *Natrum mur* and *Stannum* are perhaps the medicines which most resemble it.

The lower potency is more satisfactory than the higher ones.

N. B —It being a natural constituent of the body, it has been given by Dr. Schussler a place in his "tissue remedies."

2. *Kali Bichromicum* :—

Preparation:—It is prepared by trituration or aqueous solution up to the third potency ; above that with alcohol.

Sphere and general action :—

1. On the mucus membranes, causing a morbid increase in the quantity of the mucus formed, which is tough and stringy and sometimes degenerates into pus. The portions of the mucus tracts chiefly affected are the mouth, throat, cardiac portion of the stomach, duodenum and rectum ; the whole respiratory membrane, including the conjunctiva.

2. On the skin, producing papules, pustules and ulcers ; the ulcers have hard bases and overhanging edges, are deep and generally dry.

3 On the glands, chiefly the liver and the kidneys : the former is congested, enlarged, friable and of a dark reddish brown colour. The latter are also found intensely congested, the tubular portion softened and undistinguishable from the rest ; the urine either purulent or suppressed.

4. On the fibrous tissues, which are much irritated causing

teasing pains specially about the joints, periosteum, with its characteristic hard swellings.

Its curative action :—

1. In *chronic catarrh and ulcerations of the alimentary mucus membrane, in common chronic ulcer of the Pharynx and in syphilitic sorethroat, it is our very best medicine.* Then it is very useful in dyspepsia and vomiting from chronic gastric catarrh, the tongue being coated thickly yellow (white coat in Ant. Crud). Dr. Lippe says, it is especially useful in the dyspepsia of the beer-drinkers, where there is weight (not pain) complained of after food. In round ulcers of the stomach and those of the duodenum resulting from burns and in chronic diarrhea from intestinal ulceration, it has effected some brilliant cures.

2. It acts more strikingly in affections of the respiratory mucus membrane. In acute coryza and the catarrh of the larynx, trachea and bronchi, it is often rapidly curative, specially when the digestive mucus membrane is simultaneously attacked. It is an *anti-diphtherific* medicine and seems to suit well *when the deposit invaded the nares.* In membranous croup, the thickness and the false membrane be the indication of its use. *The discharge of it is tough, tenacious and glutinous in character, which may often be drawn in long strings.* It is also useful in acute glanders, in polypus of the narium, in catarrhal and strumous ophthalmia.

3. It has often been used with advantage in pustular eruptions and in lupus non-exudens. Moreover it is decidedly a hepatic medicine. *Dull pain in the right hypochondrium and whitish stools are its indication for use.* Its action on the kidneys has led to its use in suppression of urine.

4. It has been seen to be useful also in Rheumatic headache, lumbago and sciatica and periostites, having the action upon the fibrous tissues.

J. K. Maitra, Calcutta.

Clinical Notes.

By F. C. Majumdar, M. D.

Case 1. Babu Durga Pada Chatterji's boy, a thin, delicate looking boy, aet about 5 years had an attack of fever with catarrh on the 17th March 1896. The father is very fond of homeopathy, so he was treated from the beginning with due remedies.

Various medicines had been tried by a young homeopath to no effect. Fever went on increasing every day and on the 16th day of the fever, when delirium set in with a very high temperature I was called. He was delirious, incoherent and unintelligible, drowsy with eyes turned upwards.

Temperature in the morning 103 and in the evening it rose up to 104. 6 There was slight cough with rattling noise in the chest, soreness of mouth and redness and a raw condition of the lips, the boy was picking the lips with great force causing it to bleed. There was slight difficulty in swallowing, constant crying or moaning. There was slight distention of abdomen with offensive watery brown-colored stools.

I gave him a few doses of Baptisia 1x, to be taken every four hours.

Abdomen almost natural and stools less and without much offensive smell. But the fever ran the same course and difficulty in deglutition the same.

Arum Tryphil 3x one dose every three hours. Improvement commenced at once. Drowsiness was much reduced, and swallowing less painful, and picking and boring of lips almost gone.

No medicine the next day. Improvement continued and the boy recovered in the course of a week. I increased the nourishment as he wanted more food and after four days of the last

remedy I allowed him some solid food which he could take with ease.

The efficacy of "Arum was marvellous. I had not used this medicine before in cases of fever of Typhoid nature.

Case 2. A young woman of 25 came under my treatment for polypus of nose. She was healthy in other respects, except that monthly period was painful and blood discharge copious. She was also troubled with headache, especially on the right side which increased during the menstrual flow.

On examination I found right nostril almost blocked up with the growth. She said she can't breathe through it. The left side was better, growth was smaller and softer. Sometimes she used to bleed with the right nose.

I gave her Sanguinaria 3x, one dose every morning for a week. Her husband reported to me that her headache was less and she was lively, but the growth was almost the same. No bleeding from the nose during this week.

I ordered her to continue the medicine. I also gave Sanguinaria to apply to the growth.

Reported better, stopped medicines for a week both internal and external. The patient was in the same condition and she was given another dose of the 6th potency.

She got cured in a month and a half, growth shrivelled.

Case 3. A young woman at Ahiritola Street had white spots on her hands and legs for a long time. She was otherwise in good health. I enquired and found out that she got syphilis five years before my seeing her and she was drugged with Mercury

The sores were healed up and she was free from syphiloderma, but to her great agony she noticed white spots in certain parts of her limbs.

I told her something could be done for this if you persist long under my treatment, she had an impression that there is no cure for this disease which she called white leprosy.

However Hepar S. 39 one dose every morning for one week and no medicine the next week. In this way she continued the same medicine and got cured by it in six months.

The first effect was noticed after a month. The skin which was very white, assumed a light brown color. This became deeper and she had the natural color of her skin restored. She was dark.

Case 4. A young man 29 years of age thin and worn-out by disease came under my treatment for diarrhoea. He was treated by various physicians and methods. At last became hopeless of life.

I asked him several questions but he was reluctant to answer and became impatient of thorough examination. He was troubled with nocturnal emission and that made him weak. There were about seven or eight stools in the twenty four hours, mostly in the morning, very early. Stools were yellow and watery. There was absence of pain in abdomen, slight nausea and sweetish taste in the mouth, copious saliva. Not much tenesmus.

Apis was the first remedy flashed in my mind of which 30th potency was administered. No effect in two days. My favourite potency of Apis in the 6th which was also given had no effect. In three or four days' treatment the patient became impatient of homeopathic medication.

I gave him Nuphar L. 6, one dose dry on the tongue and in case he had the same sort of stool next morning he was to take another dose. I gave him only two powders. I prevented him taking that dose in the morning if he is better. He was wonderfully better, no stools in the morning and he slept the whole night up to about 7 a. m. Formerly he used to get up about 4 a. m. for stools which continued till about 8 a. m. He was an impatient patient, he took that dose also in the morning which I prevented him the day before. However

there was no had effect. He made a perfect recovery but I had to give a number of placebo powders.

I believe the mental symptom here is the leading indication for the cure.

Repertory of the Mind.

By Dr. B. B. Chatterji of Benares.

(*Continued from page 40.*)

After depletion ; Delirium—; on closing eyes, sees figures of persons. Cinchona ;

After dinner and evening worse. Anxiety, as after committing an evil deed ; Vera-alb ;

After dinner ; Irritable mood at and—; with pressure in forehead. Marum ;

After emotions, fever, with red cheeks. Caps ;

After exertion ; worse —; Cannot find the proper word, uses wrong words—; Sleepless nights. Agar ;

After fright ; fear, anxiety ; coldness ; fainting ; involuntary diarrhea ; Vera-alb ;

After fright, grief or vexation. Mental disturbance ; Platina ;

After fright, hysteric paroxysms. Sabadilla ;

After fright ; St. Vitus dance ; epilepsy . mania ; melancholia. Stramo ;

After fright, the fever of the fright still remaining. Opium ;

After fright, threatened abortion. Actea-R ;

After fright with vexation or anger, heat, congestions, threatened abortion. Ailments from fright following later.

After a fright afraid in the dark ; Acon ;

After going to bed. relieved—; Trembling, anguish and fear, as if some accident would happen ; all day,—; Magn - Carb ;

After having being reprimanded or scolded are sent to bed and get sick—Children—; Ignatia ;

After losing person or objects that were very dear. Great grief—; Ignatia ;

After mental excitement ; Unconsciousness—; especially just before mense ; thoughts vanish, with fainting. Nux mos ;

After mental exertion, fainting. Caladium.

After mental exertion, flushes of heat. Oleander.

After mental exertion. Worse—; Nux-vom ;

After midnight ; Worse—; Intense anxiety and with restlessness—; driving out of bed. Ars ;

After nightmare, fears to go to sleep, lest she die. Ledum ;

After onanism. Indifference, low spirited, dulness of mind—; Staph ;

After over-exertion of the mind, as with book-keepers &c. Sepia.

After overlifting. Thoughts vanish—; Psorinum ;

After overstudying. Mania ; Læthesis ;

After pleasant things happened ; Cheerful in evening—; merry, though he is worse. Merc Bin-Iod ;

After rage. Shed tears and makes exclamation—. Arn ;

After rising from sleep, especially—; Cannot endure being spoken to, or interrupted while speaking ; Chamo ;

After sleep ; Worse—; Delirium tremens—; cannot bear pressure of neckcloth ; loquacious ; Læthesis ;

After slight emotions, difficult breathing; bad effects from, fright, mortification or excessive joy. Puls ;

After smoking. Cannot control himself—; Restless—; Caladium ;

After stool. Cheerfulness; happy mood—; Natr. Sulph ;

After stool, lively, contented and looking cheerfully into the future. Fretful, ill-humoured, indolent and discontented before the easy stool, in the afternoon —; Borax.

After the least annoyance. Indifferent or low-spirited—; Kali-Bichro ;

After trying to swallow. Convulsions—; Tries to injure those around him ; Hyosc ;

After typhus ; especially—, Despairs of recovery ; thinks he will die hopeless—; better from nosebleed. Psorinum.

After visions of great sublimity, usually follow visions of a quite relaxing and recreating nature. Sudden transition from one fantasia, when completed, to another ; the general character may remain unchanged—; Cannabis Ind ;

Afternoon and in the open air ; especially in the—; Irritability,—; Æthusa-Cy ;

Afternoon ; Anxiety, with sweat—; also till evening. Natrum ;

Afternoon ; Idles through the—; does not really get at work ; changes from one work to another from one room to another, without keeping to any object ; Borax ;

Afternoon ; in—; Copious nosebleed—Out of humour in forenoon—; Arg met. ;

Afternoon in the—; Confusion of the head, with transient painful pressure on the eyes—; Chamo ;

Afternoon ; in the—; Fretful, ill-humoured, indolent and discontented before the easy stool—; after it, lively, contented and looking cheerfully into the future. Borax ;

Afternoon ; in the—; Indolent and contradictory mood—, Cantharis ;

Afternoon ; in the—; lively—; Despondent in the forenoon—; Cannab-Sat ;

Afternoon forgetful of what has passed. Delirium, loquacity during heat—; Podo ;

Afterwards suffers. Excitable, easily angered and vehement from which he—; Phos ;

Afterwards headache and colic. Anxiety and restlessness—; Æthusa ;

Afterwards stupid and irritable. Loquacity—; Lachnantes; Again ; but soon signs—; in spite of her determination to stop. Sings involuntarily, on hearing even a single note sung, laughs at herself—; Crocus ;

Again crying. Now laughing—; Changeable mood—; Nux-mos ;

Again ; finally cries—; Child cries and laughs easily ; while crying, it suddenly laughs quite heartily and—; Coffea ;

Again that, begins now this—; holds but a short time to any one thing. Unstable minded—; Bismuth ;

Again wake up as it were, to those around. Every few minutes would lose himself and then—; Cannabis-ind.

(To be continued)

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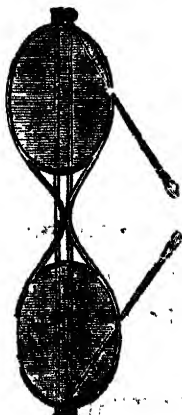
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No. 18-1, Lower Chitpur Road, CALCUTTA.

ডাক্তার পুলিনাট্রে সার্যাল এম্ বি প্রণীত

১। চিকিৎসা কল্পতরু,—গল্পীগ্রামের চিকিৎসকদিগের জন্ম অতি সরল ভাবার বাবতীর রোগের বিস্তৃত বিবরণ ও চিকিৎসা। নেটিভ ডাক্তার এবং অপর সাধারণ সকলেরই সমান উপকারে আসিবে। হিতবাদী বলেন, সাধারণের বুঝবার উপযোগী এরূপ উৎকৃষ্ট ধরণের চিকিৎসা বিবরণক গ্রন্থ আর নাই। একজন বলিয়াছেন, “আমি নাটক নভেলের ভাবার এই পুস্তক লিখিয়া চিকিৎসা শাস্ত্র প্রচারে যুগান্তর উপস্থিত করিলেন বলিয়া ইহাতে যে শিখিবার বিষয় কম আছে, তাহা নহে। বড় বড় ডাক্তারদিগের প্রয়োজনীয় বাবতীর বিষয়ই বর্ণিত আছে। ৪খণ্ডে প্রায় ১:০০ পৃষ্ঠার সম্পূর্ণ। মূল্য প্রতি খণ্ড ১০ মাণ্ডল ১০ আনা, তি, পিতে আরও ১০ বেশী।

২। কম্পাউণ্ডার সহচর বা মেটিরিয়ামেডিকা,—কারমাকোপিয়ার অন্তর্গত বাবতীর ঔষধের প্রস্তুত-প্রণালী এবং সংক্ষিপ্ত আময়িক প্রয়োগ। মূল্য ১১০, মাণ্ডলাদি ৮০ আনা।

৩। ভৈষজ্য-ব্যবহার,—সমস্ত ঔষধের ক্রিয়া ও ব্যবহার প্রণালী অতি সরল ভাবার বিস্তৃতরূপে বর্ণিত আছে। ১ম ও ২য় ভাগ, মূল্য ৩ ডিন টাকা মাণ্ডলাদি ৮০ আনা।

৪। স্ত্রী-চিকিৎসা,—চিকিৎসক এবং মেডিকেল স্কুলের ছাত্রদের জন্য। পরিবর্জিত দ্বিতীয় সংস্করণ। মূল্য ১১০ মাণ্ডলাদি ৮০ আনা।

৫। সরল শিশুপালন শিশুচিকিৎসা,—২য় সংস্করণ। মূল্য ৮০ মাত্র, ডাকমাণ্ডলাদি ৮০ আনা।

৬। ওলাউঠা নিবারণ ও চিকিৎসা,—ওলাউঠার লক্ষণ, চিকিৎসা ও যে সকল উপায় অবলম্বন করিলে ওলাউঠার আক্রমণ হইতে আত্মরক্ষা হয় তাহা বর্ণিত আছে মূল্য ১০ মাণ্ডলাদি ৮০ আনা।

৭। সংক্ষিপ্ত অন্ত্রচিকিৎসা,—গরীকাষী ছাত্রদিগের জন্য। মূল্য ২১ মাণ্ডলাদি ৮০ আনা।

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২১৫ নং চৌরঙ্গী রোড—

এবার লণ্ডনের সুপ্রসিদ্ধ ঔষধ বিজ্ঞেতা ই গুল্ড এণ্ড সন্স হইতে অপর্যাপ্ত পরিমাণে নানাবিধ আবশ্যকীয় জিনিস পত্র আনা হইয়াছে। অঙ্ক আনার টিকিট দিয়া পত্র লিখিলে ক্যাটালগ্ পাওয়া যায়।

একোনাইট; বেলাডোনা, হাইড্রাসটিস, আর্শিকা, রসটেক্স, ইত্যাদি নানা রকমের লিনিমেন্ট—প্রত্যেক শিশি ৬০ আনা; গুল্ডস এন্টি সেপ্টিক টুথ পাউডার—ইহা দস্তশুলের কি মহৌষধ, কিছুদিন ব্যবহার করিলে নড়া দাঁতও বসিয়া যায়।

ডাক্তার শ্রীযুক্ত প্রতাপচন্দ্র মজুমদার মহাশয়ের কৃত,

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চিকিৎসা প্রকরণ (১ম ও ২য় খণ্ড একত্রে বাঁধান ২য় সংস্করণ)	১০\
ঔষধগুণ সংগ্রহ (চতুর্থ সংস্করণ)	৫\
চিকিৎসা তত্ত্ব (সংস্করণ)	২১০
রক্তামাশয় চিকিৎসা (ডাঃ বেল সাহেবের কৃত ইংরাজী বহির বঙ্গানুবাদ)	১\
ওলাউঠা চিকিৎসা	৬০
প্রথম গৃহ চিকিৎসা	১১০
স্ত্রী চিকিৎসা	১১০
অস্ত্র চিকিৎসা	১\
শিশু চিকিৎসা	১১০

উল্লিখিত পুস্তকগুলি উল্লিখিত ঠিকানায়, কর্ণওয়ালিস্ ট্রাষ্ট ২০৩ নং বেক্সল মেডিকেল লাইব্রেরীতে, এবং এনং হারিসন রোড, এল, ডি, মিট্রের হোমিওপ্যাথিক ঔষধালয়ে, পাওয়া যায়।

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NEW YORK.

THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.

JUNE 15, 1904.

[No. 6.

How to treat Cholera and other Serious Diseases.

The more we grow old in practice, the more we learn to adhere strictly to Hahnemannian advice in such urgent and serious cases of ailments. Hahnemann says in his Organon about the repetition of doses as follows—

Section 547—Under these conditions the smallest doses of the best selected homeopathic medicines may be repeated with the best, often with incredible results, at intervals of fourteen, twelve, ten, eight, seven days, and, where rapidity is requisite in chronic diseases resembling cases of acute disease, at still shorter intervals, but in acute diseases at very much shorter periods—every twenty four, twelve, eight, four hours, in the very acutest every hour, upto as often as every five minutes,—in every case in proportion to the more or less rapid course of the disease and of the action of the medicine employed, as is more distinctly explained in the last note.

Again in Section 248 he says :—

The dose of the same medicine may be repeated several times according to circumstances but only so long as until either recovery ensues or the same remedy ceases to do good and the rest of the disease presenting a different group of symptoms demands a different homeopathic medicine

Here lies the whole truth of Hahnemann's advice to the question of doses of homeopathic medicines. The truth is, dose should be repeated according to the demand of the case, this requires a great deal of tact and judgment on the part of the physician who is in charge of the case.

In serious cases of cholera and other deadly diseases our aim is to stop the onward march of the disease and to avert death. For this purpose, physician is at liberty to repeat the medicine as often as he thinks best, but not more. As soon as he finds that his patient's condition is better, the course of the disease is arrested, he should stop repeating the doses. On the other hand if he sees that the disease is not of a kind leading on to rapid dissolution, he is not in a hurry to repeat the medicine. In the note referred to, Hahnemann more definitely and lucidly explained the nature of cases requiring the repetition of doses of the medicine. In this note he says,—“In acute diseases, time of repeating the fitly chosen medicine is regulated by the greater or less rapidity of the course of the disease we have to combat, so that, when necessary, it should be repeated after twenty-four, sixteen, twelve, eight, four and even fewer hours, if the medicine continue to prove beneficial without interruption, without producing new symptoms, but is not sufficiently rapid in its action for the excessively quick and dangerous course of the acute disease, so that in cholera, the most rapidly fatal disease we know, at the commencement of the disease one or two drops of a mild solution of camphor must be given every five minutes, in order to procure speedy and certain relief, and in the more developed cholera, dose of *Cuprum*, *Veratrum*, *Phosphorous* &c, frequently require to be given every two, three hours, and also *Arsenic*, *Carbo Vegetabilis* &c, at similar short intervals. In the treatment of so-called typhus fevers, the repetition, in smallest doses of the medicine that proves itself of service, must be regulated

by the above directions.” Further comment on our part is unnecessary. Wherein those of our colleagues who dogmatise say to their patients, that even in dangerous and rapid cases of disease they cannot repeat the dose whether the patient lives or dies.

The Need of Hygienic Education.

By Dr. P. N. Nandi.

After a long, careful and systematic study of nature, the naturalist, the physicist and the philosopher, both ancient and modern, all agree in this general conclusion that there are certain laws of nature, known or unknown which govern the objects of creation as regards their evolution, progression dissolution and reproduction in various forms, they also agree in another general conclusion that all objects of creation influence each other in harmony with the universal laws of nature. From this far-reaching result of induction, it is proved beyond doubt that our birth, our longevity and our death are the results of the influences of our surroundings—influences which are as varied, subtle, numerous and sternly certain in their operation as they are profoundly mysterious in their exact nature and origin. The study of external objects in relation to ourselves for the preservation of health and prevention of disease is therefore the prime object of the medical science. From time immemorial physicians all the world over have been busily engaged in investigating the different laws which govern our constitution in so far as they tend to maintain our health and to relieve us from the sufferings caused by disease. The accumulated results of centuries of investigation are now at our disposal. From an impartial examination of the different investigations of different systems under names such as — Allopathy, Homeopathy, Hydropathy, Ayurved, Chloropa-

thy, Unani etc. We shall be able by process of generalization and classification to discover that there are some truths at the bottom of every popular system of medicine, which are overlooked by the other systems and that among the followers of every system there are many who, without taking the least trouble to investigate the truth of other systems believe exclusively in their own on mere empirical grounds as the only rational system of treatment in all kinds of disease. There is no doubt that in each individual system of medicine some diseases are cured permanently and some are only relieved temporarily, but the vast majority of cases remains uncured in a very wretched state of distress. Incurable sufferers are life-long subjected to heart-rendering agonies with a phantom of false hope of cure held only by their attending physician whom they believe not because of his having cured similar cases, previously but because of his extensive practice, wide learning or benevolent disposition. One would fain disbelieve all this, but it is too true. As time wears on the grip of death becomes firmer and firmer, and finally closes woeful scene.

That the various present systems of medicine are utter failures, is apparent to every intelligent man, and a public distrust of them is slowly but steadily manifesting itself even much to the detriment of the treatment of curable cases, under these circumstances it has become an imperative necessity for advocates of the different systems to start at once, with aid and co-operation of the rich and the poor, a sanitary establishment on common principles. We mean to organise an establishment for the hygienic treatment of longstanding, chronic and the so-called incurable cases. As most of us know the hygienic treatment means the treatment of diseases not by drugs but by fresh air, pure water, selected food, proper clothing, suitable exercise, delightful enjoyment and well-regulated heat, light and electricity.

The success in the treatment of a disease depends upon

the theory on which the particular system is based in relation to the morbid symptoms and upon the skill and the judgment of the physician in the administration of the drugs.

The present scientific investigation of drugs is directed to their chemical, mechanical, physiological, pathological and bacteriological actions upon our systems and to recording the results obtained from clinical observation under different circumstances. With untiring zeal and perseverance and by the sacrifice of enormous sums of money and various lives, medical investigators of late have enlightened us on many important obscure points relating to our health, disease and death but the causes of our disease are very numerous. The theories upon which our etiological knowledge rests are very often mere hypothesis, and at the same time the pathological lesions which are produced by these morbid causes, are often very obscure. These are the greatest obstacles in the way of further advancement of the healing art onward with the progress of time by mere observation of the actions of drugs upon our system in the sick bed or in health.

To be continued.

What Should a True Homeopath Learn and Unlearn.

In our last we spoke a little on the result of pathological prescription. Here we quote a few remarks made on the so-called *homeopathic physician*, by our first great master Hahnemann. They are as follow:—

“Some physicians, who would like to be regarded as homeopaths, have erred so far as to endeavour to combine allopathic routine and homeopathic practice. But such a course proceeds from complete want of the principles of homeopathy, from indolence, conceit, and indifference to the

claims of the suffering fellow-beings. Besides unpardonable negligence in the selection of the most appropriate homeopathic specific for each particular case, the mainspring of this mixed practice is frequently to be found in the desire of gain, and other ignoble motives. As for the result, it is easy to see that such practice is frequently, unlike pure and conscientious homeopathy, is unable to cure complicated and obstinate diseases, sending many a patient to that 'country from whose bourne no traveller returns' while the doctor offers the soothing consolations to the friends that every thing has been for the best of the patient, unconsciously including many irreparable errors that always arise from allopathic practice."

Learned colleagues, allow me to quote a few lines, from the Notes and Explanatory remarks appended to the text of the Organon. It is that "A physician, striving to penetrate in inner condition of the organism, may err every day; the homeopaths on the contrary, after having carefully comprehended the totality of the symptoms possesses infallible guide, and when he has succeeded in entirely removing all the symptoms, he will certainly have cancelled the internal and obscure cause of disease."

Our humble prayer to the so-called Homeopathic physician is that they should abstain from writing on the pathological descriptions of diseases, their pathological speculations, diagnosis, prognosis, and so on. It would do better for them if they would be a little considerate, to do justice to the cause of Homeopathy and they are sure to find their reward in the speedy and permanent recovery of the patients, by a thorough study of *Chronic Diseases* by Hahnemann, which we think and every one should think, complementary of the Organon, of the Art of Healing.

N. H.

To be continued.

Materia Medica Notes.

By P. C. Majumdar, M. D.

Natrum Phos. Is useful in acid dyspepsia with flatulence. Sour eructations and vomiting.

Canine hunger, eructations after eating; of food after dinner. Heaviness of the stomach, colic in the evening after lying down, with discharge of flatus.

Stools watery, yellow brown containing thicker lumps. Diarrhea before morning with colic.

Constipation difficult, in small lumps. Diarrhea from acidity. Greenish stools.

Osmium. Acts more upon the respiratory organs. Mucus in trachea, with constant inclination to cough. Bronchitis. Larynx in lumps of mucus easily loosened. Mucus hangs like a thread, irritates hacking cough, causes vomiting, pain in chest scraped and raw sensation. Hoarseness with pain in larynx aggravated by singing and entering a room. Cough in the morning. Convulsive cough without expectorations. Hacking cough better by deep inspiration. Worse by motion in open air. Dyspnea.

Dim vision, worse right eye. Letters run together. Candle lights surrounded by yellow circles or rainbow circles or green circles.

Violent supra-orbital and infra-orbital neuralgia with lachrymation. Glaucoma with iridescent vision and severe pain around the eye.

Coryza. Constant discharge. Smell similar to chlorine. Swell diminished.

Violent fluent coryza with tickling in the larynx and dyspnea.

Oxalic Acid. Acts upon the digestive apparatus.

Appetite lost. Aversion to tobacco smoking. Eructation acrid, painful and sour. Hiccough during the day. Nausea in the

morning with cutting in the abdomen. Frequent vomiting with purging. Gripping and twisting pain in the pith of the stomach. Pyrosis in evening. Burning in the pith of the stomach and gnawing. Tenderness on pressure.

Gastralgia with feeling of coldness between the stomach and the navel.

Abdomen distended with flatus. Difficult emission of wind. Sticking pain in abdomen extended to the region of spleen, worst by deep breathing. Cutting pain in the forenoon after a thin stool.

Stools watery frequent, involuntary. Diarrhea in the morning after rising with colic.

Diarrhea worst after colic. Profuse watery stools with frequent ineffectual urging. Dysentery, stools of blood and mucus, preceded by colic, followed by nausea and pain in the calves.

Burning pain in the urethra at noon during micturition. Urine loaded with enormous crystals of oxalic of lime, contains some blood discs. Urine profuse at 5 p. m.

Oxaluria with general gouty symptoms and exhaustion.

Neuralgia of the spermatic cord, worst by slightest motion. Amenorrhea with great Asthenia. Amenorrhea from taking cold.

Peeps into Cures by Homeopathy and by a Single Medicine.

Neuralgia: One Abdul Shaik, a hotel keeper of Raghunathganj (District Murshidabad) aged 45, came up to me for homeopathic treatment after having exhausted the other modes of allopathic and kabiraji treatment, with a despair that he would not live any longer and that he was going to his native place in Behar, where he intended that his death, sup-

posed by him to be inevitable, would take place. He complained of aching sensation in the left eye, left portion of the head, left shoulder and left arm, of intense pain in both the jaws on left side, neuralgia shooting and darting in its character. With this, there was fever daily in the afternoon for two months and a half and *utter absence of sleep* from the pains. There was neuralgic tooth-ache previously of a slight nature for three years. He could swallow no food for neuralgic pains in teeth. The legs from knees to the feet began to ache at night reaching its height at 3 A. M. rendering his existence intolerable in that late hour of the night.

The neuralgic pain first made its appearance in the left jaws, extended up the eyes and then gradually spread itself over the left shoulder and the left arm; never giving rest but reaching its acme in the afternoon.

There was burning in the eyes, in the scapula, in the rectum at the time of passing stools, and of hands and feet the whole day, and during urination. There were also pains in small of back and in feet during defecation. The tongue was whitewashed.

On enquiry, I came to learn that three years ago, a certain Mahomedan *Fakir* administered to him *Hakimi* medicine for cure of nervous debility and for strengthening the tone of his body. From that time, neuralgic toothache on the left side made its appearance. The neuralgic pains gradually developed till the above condition was reached. The patient resorted to allopathic treatment in the Charitable Dispensary, but could get no relief.

It struck me that the Mahomedan *Fakir* might have administered some mercuric or other metallic preparations and guided by that idea my choice lay between Lachesis and Hepar Sulphur.

I began treating him from the 20th March 1904 and gave him Hepar Sulph 30 twice daily. On the first night, there was

three hours of sleep, of which he had been deprived for more than two months. On the second day, he had six hours of sleep, with marked diminution of the symptoms. On the third day, he had full sleep.

On the 24th March, the burning sensation on various parts of the body had disappeared, (except on the hands and the feet), with backache at the time of defecation. Neuralgic pains almost disappeared.

The urine still remained red.

Placebo for two days and then Hepar Sulph 30 once in the morning for a week. All the complaints have disappeared and he has now resumed his former avocation.

Dropsy—*Apis 200*. Shib Chandra Roy's (Accountant, First Munsiff's Court) daughter aged 12.

The girl had at first itches; then fever. After use of allopathic medicines and purgatives, the itches disappeared with the fever. The purgatives did not act sufficiently well. Then came in a train of symptoms, whitish, watery diarrhea five to six times a day with mucus. Rumbling in bowels and griping round about the navel. This was turned to constipation after the old School treatment. The liver became sore on pressure, urine reddish almost suppressed, and there was palpitation of heart. The patient complained of aching stinging sensation in the chest and of striking of blows by somebody, the legs began to ache, the eye-lids were swollen, the face was puffy and there was dropsical swelling of the feet up to knees and of hands.

I found the patient under above conditions under allopathic treatment, the dropsy had invaded the heart and the pulse was very weak. *Apis 200* was given for four days every two hours. The palpitation of heart and the chest symptoms had all disappeared. by the 10th of April, the urine had become larger in quantity; swelling and pain remained but in a lesser degree.

Again Apis 200 was given on the 13th April, the urine which appeared only at the time of stool began to appear at other times and from the 14th the swelling in the ankle joint began to subside.

On the 18th April, the puffiness of the face, back and waist completely disappeared; there was good urination but traces of swelling of feet and ankle joints remained.

On the 21st of April, the patient recovered completely and there is not now the least trace of dropsy.

The use of boiled rice, salt and water was prohibited for a few days. I gave the patient *Mānmawnda*—a preparation of *Mān* (Arriḍanai) dry rice and milk.—Barley was also given.

Kangal Chandra Gupta.

Raghunathganj.

Clinical Notes.

By P. C. Majumdar, M. D.

Case 1. *Appendicitis.* A young man aged 30 years apparently of good health and working hard in a good office, had on attack of pain in the right side of his abdomen with fever and great prostration. The Civil Surgeon of the place diagnosed it as a case of Appendicitis. He blistered the part and gave some mixture. This cured his case for the time being.

He was busily engaged in his office works about six months after the first attack of pain, when he was seized with violent pain in abdomen, vomiting and shivering, the same surgeon was called again, who put a mustard plaster over the part and a mixture was given for the fever.

This time it had not that good result. Though the fever abated and pain was somewhat less, he was not cured.

The surgeon told him to submit to an operation and unless he does so he will die from another attack.

The gentleman came to Calcutta and placed himself under my care in April 1903. I examined him thoroughly.

There was a hard nodular spot in the right side of the abdomen, between the umbilicus and right crest of ilium. There was tenderness on pressure over the spot. sometimes there was cutting and digging pain felt at that place. There was no swelling.

Bowels obstinately constipated, some balls passed after two or three days. There was slight feverishness in the evening. Burning of feet and slight thirst. The swelling was more in the beginning. Pain was felt though slightly now in walking.

He said he was getting thin and prostrated every day.

Bryonia 6x one dose morning and evening for three days

Reported no better. • Bowels somewhat relaxed.

On further examination nothing new was noticed, only there was slight flatulence in abdomen and flattening of the nodular swelling.

Lycopodium 200 one dose dry on the tongue no more for the next three days.

Reported better and wanted more medicine.

Placebo powders morning and evening.

Better in every respects, swelling gone down, but there was slight pain on pressure over the part.

Lycopod 200 another dose and placebo for two days.

He was cheerful and free from fever. Bowels regular and the patient said that he was feeling stronger every day.

I told him to take no more medicine, but in case he gets another attack I advised him to report to me at once if there be any active aggravation. The Civil Surgeon told him that another attack might kill him then and there, so operation is the only thing to save him. He had no more attack for

more than one year and he is doing active work as usual. His bowels are regular and he is now enjoying perfect health.

Case 2. A young woman, aet 25 years, robust and lively came to me with intense headache, she was otherwise healthy.

A year before she contracted syphilis and was treated by allopathic and *kabiraji* medicines.

After the sore had healed up by the application and the internal use of their medicines, a crop of copper-coloured eruptions appeared over the whole body.

She took extract of sarsaparila and iodide of potassium for a long time. Not getting much benefit she applied some *kabiraji* oil. The eruptions disappeared within a short time. Since then she was not in good health. Rheumatic pain appeared now and then.

The headache she complained now was of a very troublesome character. It came on generally in the midday. Pain located mostly in the frontal region. It was so intense that she could not describe the nature of it. From midday it gradually increased till about ten at night when it reached its height. Then it decreased gradually and in the morning there was nothing to complain of.

Rheumatic pain in various joints also made its appearance, aggravated by movement and cold application, ameliorated by warmth.

Merc Sol high, Nitric acid, Cedron, Phosphorus and Sanguinaria were given without much benefit.

I gave her a dose of Syphilium 200, and a few placebo powders. She came to me after a week and reported to me that the first powder was wonderful. It took away not only the pain and the headache, but also the rheumatic suffering. She wanted some more of that powder and a few placebo powders were given with direction to take once every morning. She was perfectly recovered.

Case 3. An elderly gentleman had been suffering from

asthma for a long time. He is a lawyer by profession, so his disease was a great hinderance to his work.

After undergoing treatment under various physicians of all schools of medicine, he came under my treatment in January 1899.

He is of corpulent body, somewhat lethargic in habit subject to attacks of acid rising with vomiting and purging. He was especially worse after a full moon.

Attacks generally came on in the latter part of night. He could not sleep or lie down which aggravated the paroxysm.

Arsenic 30 and afterwards 200 did no impression on the case. It was followed by Calc C 30. This latter medicine gave him much relief for the time being. He was better for two weeks and in the change of the moon he was again worse.

This time he had palpitation of heart, constipated stools, copious urination and complete exhaustion. Acidity was not so prominent as it was at other times of the paroxysm.

The fit now generally came off at about 3 a. m. and lasted till 10 a. m. It was not dry but attended with pus like sputa. He complained of pains in chest and back.

Kali Carb 30, three times a day. No effect in two days. I changed the medicine and gave Silicia 30 once a day. This had the desired effect. The paroxysm stopped at once. There was copious discharge of mucus for a few days.

He got rid of the paroxysm and since then the whole disease.

Repertory of the Mind.

By Dr. B. B. Chatterji of Benares

(Continued from page 110.)

Again would spit and bite at those around. Mania, at one time merry—; Bell;

Against his will. Crying—; Alumina;

Ages; a few seconds seem—; a few rods an immense distance. Exaggeration of duration of time and extent of space—; Cannabis Indica ;

Aggravated by movement. Confusion of head—; Bell ;

Aggravates. Consolation—; Cries, knows not why—; Cactus ;

Agravates, consolation—; Sad, weeping—; with palpitation and intermittent pulse. Natrum-Muria ;

Agravates headache and produces sleep. Mental exertion—; Sabadilla ;

Agravates them, thinking of complaints—, especially hemorrhoids. Causticum ;

Agravation from excitement. Spongia ;

Agravations from mental emotions. Actea-R ;

Agitation, attempts to run away. Glonoin ;

Ago. Forgetfulness, of what he had done a short time—; Calc-P ;

Agonized tossing about. Anxiety, restless, ; Acon ;

Agreeable company. Fear of being alone, but disinclined to meet even—; Clematis ,

Ailments after continued mental labors. Nux-vom ;

Ailments are unbearable and affect him much, the most trifling—; Oversensitiveness to external impressions, noise ; smells ; light and music, or—; Nux-vom ;

Ailments from anger. Acon ; Aru ; Opium ;

Ailments from anger ; from chagrin ; child has spells of rage. Acon ;

Ailments from anger, mortification, or vexation with indignation. Ipec ;

Ailments from bad news. Igna ;

Ailments from chagrin. Acon ;

Ailments from disappointed love. Aurum-met ; Calc-P ; Phos-ac ;

Ailments from emotions. Kresote ;

Ailments from, excessive joy; fright anger or shame.

Opium ;

Ailments from fright. Arn, Opium ;

Ailments from fright following threatened abortion. Acon ;

Ailments from fright or anger. Arn ;

Ailments from grief. Aurum-met ; Calc-P ; Graphi ; Ign ;

Phos-ac ;

Ailments from grief, dissappointed love. Aurum-met ; Calc-

P.

Ailments from grief, mortification, bad news or suppressed mental suffering. Ign ;

Ailments from grief, sorrow, homesickness, disappointed love ; particularly with drowsiness, night sweat towards morning, emaciation. Phos-ac ;

Ailments from homesickness. Clematis ; Phos-ac ;

Ailments from homesickness or contrition of spirit. Clematis ;

Ailments from indignation with vexation or reserved displeasure. Staph :

Ailments from mortification. Ign ;

Ailments from shame. Opium ;

Ailments from sorrow. Phos-ac ;

Ailments from suppressed mental suffering. Ign ;

Ailments from vexation, with fright. Petrol ;

Ailments ; gastric—; From over taxing the mind ; sleepy—; Hysteria. Nux-mos ;

Ailments ; Severe—; From even slight emotions. Psorinum ;

Air. After a walk in the open—; Indisposed to think.—Arn ;

Air. better in open—; Anguish accompanied by great oppression—. Cannab ind ;

Air. better in open—; worse in room—; Anxiety—. Bry ;

Air. better walking in open—; Dullness of head during coryza—. Merc ,

Air. Despondent in the open—. Kali C ;

Air ; Imagines he is hovering in the —, like a spirit, when walking in the open air. Asarum E ;

Air ; in the open—; especially in the afternoon and—; Irritability,—; Aethusa ;

Air. relieved in the open—; Anxious in the room,—; Magn m.

Air. when walking in the open—; Hypochondrical depression and indifference—; Conium.

Alcoholic drinks. Stupid from excess in —; Vera-alb ;

All forenoon, Dull—; disinclined to work. Psorinum.

All his undertakings will fail. believes that—; that Indifference to occupation, loses all inclination for work ; melancholic, believes he is despised by his family ;—; Arg-nit.

All occupation or labor. with aversion to—; Great indifference,—; Rhodo ;

All persons are demons. She thinks—; Platina. •

All questions ; Repeats—; before answering them ; Zincum.

All self-control ; must use—; to prevent shooting himself. Satiety of life ; —; Natr-sulp ;

All that he had forgotten. he remembers—; Very forgetful, especially in business ; during slumber, however,—; Selenium.

All the time, Feels like crying—; but crying makes her worse. Stann ;

All the time, prays—; Religious mania,—; Aurum, Stramo ;

All the time, talks—; sings, makes verses. Loquacious, —; Stramo ;

All the time. weeps—; Melancholic fears death,—; Stramo ;

All thing. aversion to—, Moroseness : Ill-humor.—; Bovista.

To be continued.

Change of type in Cholera.

(Continued from page 101.)

The medicine to be taken next in importance is *Ricinus Communis*;—profound adynamia and extreme collapse characterises the two. We have said before, that in *Veratrum* the stool is slightly greenish; but in large number of cases, the stools are not so coloured but simply rice-water or transparent in colour; in so far as the stools are simply transparent or rice-water color, the distinction between the two is nil; the stools of *Ricinus*, simply watery fluid containing lumps of mucus or there “simply serous liquid mixed with mucus and the stool look as in cholera.”

Dr. Salzer thinks the distinction between *Veratrum* and *Ricinus*, consists of:—*Veratrum* stools being accompanied by pains and in *Ricinus*, the stools are without any pain. We do not think that the point has been thoroughly settled; in proving of *Ricinus* “pain with the stools” is mentioned by Allen as a characteristic symptom. “A sensation as of body lay over the stomach with profound anguish” has been pointed by Dr. Salzer as a characteristic of *Ricinus*, but it has yet to be clinically verified.

Below we point out the distinction between *Veratrum* and *Ricinus*, which are to be found in every day practice:—

Veratrum.

- (1) Vomiting first then purging
- (2) Very rapidly advancing collapse; after 3 or 4 stools collapse complete.
- (3) Stools greenish: watery, transparent watery or rice-water-like, with or without granules of mucus.

Ricinus.

- (1) Purging first then vomiting.
- (2) Collapse comes on slowly, generally some hours after; sometimes even 48 hours after.
- (3) Stool: transparent water, with lumps of mucus.

(4) Vomiting : profuse vomiting —watery or greenish tinged.

(5) Stools, accompanied with or without pains ; pain around the navel or as if the intestines are strung together ; painless stool predominate.

(6) Cramps follows very soon the purging ; cramps of the fingers and toes.

(7). Urine-complete suppression of urine ; no albuminous urine.

(8) Thirst : comes on rapidly.

(9) Exhaustion and cold sweat on the forehead from the very beginning ; cold sweat predominates throughout the whole body.

(4) Vomiting of greenish tinged liquid.

(5) Stool without pain ; where pain is present, it is at the Epigastrium radiating towards the navel and hypochondrium ; either light, for strong pressure aggravates the pain, at the same time the patient feels the sensation in the intestines ; the patient feels, as if all the intestines were violently drawn together, rumbling in the bowels, abdominal pains, epigastrium, sensitive to touch.

(6) Cramps : the muscles of the limbs as well as the trunk are affected with very painful cramps.

(7) Urine : complete suppression of urine, albuminous urine.

(8) Thirst : comes on slowly.

(9) Exhaustion comes on sometime after ; absence of cold sweat in the forehead and the body.

To be continued.

B. B. Maitra, M. B.

Selection.

WHY STUDENTS OF MEDICINE SHOULD SELECT THE HOMOEOPATHIC SCHOOL.

The Medical Century of March 1st contains three excellent essays entitled, "Why Students of Medicine should select the Homeopathic School." This is an opportune time for the discussion of this subject. Soon the students who have completed their courses of studies in the universities, colleges or preparatory schools will receive their diplomas, and will be called upon to decide what business or profession they will enter. Every year five thousand young men and women decide to enter upon the study of medicine. Many among these are not sufficiently acquainted with the requirements of a medical education to enable them to form an intelligent opinion as to which school would best fit them for their medical career. We shall assume that the prospective medical student appreciates the responsibilities involved in the practice of medicine. That it is his desire to obtain, in so far as possible, a thorough and practical knowledge of every means which will aid him in preventing and curing disease. We shall further assume that he will base his decision on facts rather than on fancy, on conviction rather than on tradition and environment.

There are 20 homeopathic colleges in this country. These are located in Boston, New York, Philadelphia, Baltimore, Cleveland, Cincinnati, Ann Arbor, Detroit, Minneapolis, Chicago, Iowa City, St. Louis, Louisville, Kansas City, Denver and San Francisco. The laboratory and clinical facilities in these institutions are fully equal to those of the average old school college, and the statement that the standard of instruction is of a higher average order than in the 123 old school colleges is well within the truth. The first college to establish a three years' compulsory course in medicine was a homeopathic college, and it antedated this feature of old school instruction by twelve years. The American Institute of Homeopathy was the pioneer in the movement for a four years' medical course and for a higher educational standard in the entrance and graduation requirements. There are in the United States 84 general hospitals, 61 private hospitals, 58 sanatoriums, 56 dispensaries, all avowedly homeopathic, and 66 other institutions, State, municipal, etc., wherein homeopathic treatment is employed. Opportunities for clinical study and investigation are therefore ample. The visiting physicians and internes of these institutions are naturally chosen from the graduating classes of homeopathic

colleges. The smaller classes bring the student into closer personal contact with the professors, as well as increase his chances for hospital appointments on graduation.

The homeopathic colleges are the only medical schools that include in their courses the entire field of medicine. The old school institution teach their students but one part of medical therapeutics. Their instruction in materia medica and therapeutics deals only with the so-called physiological action of drugs, and disregards their specific dynamic action. That drugs can produce cures by specific dynamic stimulation has been demonstrated, and has been recognized by many of the foremost investigators in scientific medicine. The allopathic medical schools, however, as well as the rank and file of old school practitioners, are not yet prepared to accept this truth so contrary to their traditions and prejudices. It is to be regretted that they thus wilfully exclude themselves from this great department of medical science. The eclectic schools are also incomplete in their medical instruction. While these appreciate the value of a knowledge of the dynamic action of drugs, they confine their studies largely to vegetable remedies and fail to utilize the therapeutic effects of the many valuable remedies derived from the mineral kingdom. The so-called osteopathic, neuropathic, psychopathic, and the other similar institutions, limit their instruction so closely to special departments of medicine that they cannot be considered as giving a general medical education. Whatever value they may have is available to the post-graduate rather than to the undergraduate student. The accepted definition of a homeopathic physician is, 'one who adds to his knowledge of medicine a special knowledge of homeopathic therapeutics and observes the law of similia. All that pertains to the great field of medical learning is his by tradition, by inheritance, by right.' This is the educational standard which the American Institute of Homeopathy has set before our colleges. They must and do teach chemistry, biology, physiology, anatomy, pathology, surgery and and diagnosis equally as well as other medical schools. This fact is recognized by law, and in many States the board of medical examiners submit the same questions on these subjects to both allopathic and homeopathic students. Their instruction in the department of materia medica and therapeutics must cover the physiological action of drugs and the principles of preventive and palliative medicine. When they have thus thoroughly and completely covered the field of medicine as taught in the old school colleges, they must go further and give the student a more intimate knowledge of drug-action as shown by provings on healthy human beings, and how to utilize this knowledge in the cure of the sick according to the

principle of similia. We do not claim that homeopathy is all of medicine, but we do claim that no medical course is complete that does not include this large and essential part of drug therapeutics.

The fundamental features of homeopathy are :

1. Disease produces certain changes in the body which are manifested by symptoms—subjective and objective—or what we call the totality of the symptoms.

2. Drugs produce certain changes in the body which are manifested by symptoms—subjective and objective—and an exact knowledge of drug-action must be obtained by experimentation on healthy human beings.

3. The curative relation between these two sets of phenomena is expressed in the principle "*similia similibus curantur*."

Homeopathy is therefore a general fact—a principle of nature. It is practical, simple and intelligible, it is a guide to the selection of a remedy for all time and applicable to all forms of disease.

Homeopathy has been wilfully or ignorantly represented by its opponents as being what it is not. Homeopathy is not an irregular practice. It is founded upon scientific investigation and a scientific principle. Its colleges are chartered by the State and its practitioners are examined and licensed by legally constituted authorities. Homeopathy is not unscientific practice. It is not opposed to pathology or diagnosis. It is not "little pills"—they are simply convenient vehicles for the pleasant administration of medicines. It is not an infinitesimal dose ; this is a popular conception fostered diligently and perhaps ignorantly by the opponents of our system. "*Similia similibus curantur*" says nothing of the dose, though clinical experience has shown that it is preferable to administer the smallest dose that will cure. It is not quackery ; quackery is a deception, and the methods homeopathy are open to the world, and we seek the fullest investigation by physicians, students or patrons. To quote one of the essays previously referred to, "By homeopathy is not meant, for example, as our opponents assert to ridicule us, that if a man be poisoned he must take more poison, that to remove a silver from a finger another must be introduced, that to cure a burn one must thrust the burnt part into the fire, nor to strike the place that was struck, nor to shallow a tapeworm to remove one. These interpretations of homeopathy were written with the finger of ignorance on the ragged page of prejudice and we stoop not to notice them further." To come to the practical point, what has homeopathy accomplished ? The most potent factors in the development of modern medical therapeutics have been the influence of Hahnemann and of homeopathy. Osler attributes "aboye all to the valuable

lessons of homeopathy the progress in the battle against polypharmacy, or the use of a large number of drugs, of the action of which we know little, yet we put them into bodies the action of which we know little, yet we put them into bodies the action of which we know less." A pamphlet published by the American Medical Association in 1899 contains the following statement: "Homeopathy has done a noble work; it has served its purpose well. Look back a hundred years to the time of its birth, and contrast the methods of practice then in vogue with those in favor to-day, and tell me whether a stupendous revolution has not been wrought and largely through the instrumentality of Samuel Hahnemann."

Hahnemann deserves the credit of having insisted upon the adaptation of a drug to the diseased individual, not to the disease *per se*. For years the homeopathic school was condemned and ridiculed for upholding such a doctrine. That the dominant school has at last accepted this truth is shown by the following quotation from the London *Lancet* of February 24, 1900: "That the physician has to study not disease, *per se*, but the disease man, is a truth which took us some twenty two centuries to learn, but which Aristotle knew some 350 years B. C. "Until fifty or sixty years ago disease was regarded as an entity distinct from the body to be expelled from it by drugs like a tapeworm, whereas we now regard it as a state affecting the entire man, body and mind, structure and function, and as this state varies with constitution, inherited tendencies, antecedents and surroundings of the man, it requires a corresponding variety of treatment. The wise physician adapts his treatment to each patient's peculiarities; to one he may give a certain drug, to another with the same disease a different drug," etc.

Hahnemann was the first to carry out the systematic testing of drugs on healthy human beings, in order to obtain an exact knowledge of drug-action. Many drugs have a decidedly different action on animal and on man. The fallacy of obtaining an accurate knowledge of drug-action by experiments on animals or diseased persons is therefore evident. We trust that for the good of humanity and of medical science, this principle of drug-proving which the homeopathic school has so long defended will soon gain general recognition among medical men of all schools.

Serum therapy, the most recent development of modern medicine, was said by Professor Rudolph Virchow to rest upon a homeopathic basis. Dr. Baradat, in a paper read before the British Tuberculosis Congress, tells us that the therapeutic value of natural serums is due to their "dynamic" action. That is, they are capable of exciting the resist-

ing power of the cells against disease. The dynamic power of remedial agents is something new to practitioners of the dominant school of medicine.

Statistics might be quoted to an almost endless extent showing that the mortality-rate is lower, and the duration of diseases shorter, under homeopathic treatment than under any other system of medicine. Our opponents have said it is because we give no medicine. That does not alter the facts just alluded to. We refer those who are interested in this subject to a work by Dr. T. L. Bradford, of Philadelphia, entitled, *The Logic of Figures*. It is sufficient at present to quote the following from Dr. Osler: "Nobody has ever claimed that the mortality among homeopathic practitioners was greater than among those of the regular school."

Every individual who contemplates entering the medical profession for the purpose of earning a livelihood must consider the question, "Is the medical profession overcrowded?" This is not to be asked for purely selfish reasons. A man's duty to himself, his family, and to the social body requires that he should engage in some calling which will make him self-supporting. The old school journals and societies everywhere are urging that the field of medicine is already overcrowded. The number of graduates each year from old school colleges is far in excess of the demand. As a result many are compelled to abandon the practice of medicine, or to eke out an existence on an income less than that of skilled workmen in almost any mechanical trade. In spite of this excess of physicians of other schools, there is an ever increasing demand on the part of the public for homeopathic physicians. (This alone is a splendid testimony to the practical results of homeopathy.) The number of graduates of homeopathic colleges is scarcely sufficient to make up for the older practitioners who die or retire. So great is the demand for homeopathic physicians that the American Institute of Homeopathy in 1902 published the following statement: "The demand for homeopathic physicians throughout the United States far exceeds the supply. Thousands of small cities, towns and villages are unable to secure the advantages afforded by the homeopathic system of medical practice. Demands for graduates of this school of medicine are constantly reaching our twenty medical colleges. The demand for physicians come from every State in the Union. The American Institute of Homeopathy, mindful of her obligation to the public, not only calls attention to this public need, but also to the fact that there are twenty medical colleges in the United States thoroughly equipped to teach *all branches of medicine and the science and practice of homeopathy*. These colleges earnestly solicit and will welcome young

men and women of good moral, physical and mental endowment, possessing a high school education or its equivalent, with elementary knowledge of Latin.

There is but one homeopathic physician to eight old school physicians. In spite of this fact, in many communities 50 per cent. of the population are patrons of homeopathy. It is significant that there is a larger proportion of the educated and moneyed class among these.

To summarize and to conclude, we believe that students of medicine should select the homeopathic school for the following reasons:—

1. It offers all that old school colleges can offer in the medical field, and more since it adds thereto a knowledge of homeopathic materia medica and therapeutics

2. By instructing the students in every department of medicine it enables him to be of greater benefit to humanity. The physician who refuses to utilize the homeopathic method only half tries to cure the sick.

3. It is a scientific system; its colleges and teaching facilities, laboratories, hospital libraries and journals are surpassed by none in the field of medicine.

4. It offers a useful profession that is not overcrowded, a competent living to all, and to those who are deserving fame and fortune.

• • • *The Hahnemannian Monthly.*

Notes on Materia Medica.

(Continued from Page 106.)

Hepar Sulph, *Kali Iod*, and the mercurial preparations are analogous to the general action of it. *Arsenic* and *Tarter Emetic* resembles it in its action on the mucus membranes and the skin. *Spongia*, *Iodine* and *Bromine* act like it upon the larynx and trachia; *Mercurious* on the liver and *Meserium* and *Phytolacca* on the periosteum.

The lower dilution is mostly recommended.

Kali Chloricum —It is prepared by trituration or aqueous solution.

It has been found to give the venous blood an arterial hue and improves the cachectic states of the system; for

this it has been found to be of use, in *Syphilis*, *Cancer* and *Phthisis* in patients of broken-down constitutions. According to Dr. Ringer, it is of signal service in mercurial and simple salivation, in ulcerative *Stomatites* and *aphthæ*.

It is particularly useful in ulceration of the edges of the gums. It is said to cure follicular and phagedenic ulceration like a charm. Dr. Hughes confirms the above statement and further adds that it is beneficial in *epithelial degeneration of the mucus membrane of the mouth*, which often becomes the forerunner of cancer.

Dr. Drysdale has recorded a case of *facial paralysis* beginning with face-ache, in which a rapid cure was effected by the first decimal trituration of it, after the failure of *Belladonna* and *Rhus*. He prescribed this medicine, not for the paralysis, but for the presence of *tenderness on touch or pressure on the affected side*, which was prominent among its symptoms.

Mercury, - *Iodine*, *Nitric* and *Muriatic acids*, and *Iris* are the analogous of it, in its action on the mouth.

The first decimal trituration is mostly used.

Kali Nitricum :—It is prepared by trituration to suit our purpose.

Its physiological actions :—It paralyzes the spinal chord and the heart arresting the action of the latter in diastole.

(2) It acts like the alkalies generally *on the blood*, exerting there a *spoliative and anti-plastic influence*. Moreover it is a *diuretic* and the solid constituents of the urine seem increased *pari passu* with the liquid. The irritant influence on of the *kidneys*, on the respiratory mucus membrane and on the *Salivary glands* are to be found in its action. There was often much *pyrexia*.

We are sorry that there is not much to be found of clinical record about the efficacy in the application of this remedy, yet from the above facts some therapeutic indications may be drawn.

Its action in *acute Rheumatism* is hardly that of a mere alkali. Hahnemann mentions *Asthma* as a morbid state, especially calls for it. It has also been praised for in *Enuresis*.

We have nothing to say much about its dose or action at present, as yet they lack provings.

Kali Permanganicum :—The only use of this medicine is to be seen, in *acute inflammation of the throat*, the membrane being horribly offensive, extending to the nares, *larynx* and *Salivary glands* and along the Eustachian tubes. With these symptoms there were diuresis and obstinate constipation and much weakness.

Drs. Drummond and Woodgate speak highly of this, in affections of the sore-throat. We have seen it of some efficacy in dark-coloured, offensive diarrhea, with vomiting fluids in the mouth returned by the nose.

It has also the chemical power in *dissolving the false membrane* and destroying the offensive emanations of diphtheria. We have one thing more to say here with *Stille*, that upon mucus surfaces it causes neither pain nor irritation.

Dose :—The lower one is preferable.

Kali Arsenicosum :—In chronic eczema dry or moist it is found to be of use, *when becomes worm the patient itches it*; he becomes lassitude pale and of sallow complexion. Sometimes it has been seen, that the itching becomes worse when undressing or on walking.

In a female patient, with large pustules *worse during menses*, it has done a great benefit.

It has also some effect on *gouty nodosities* of joints aggravated at change of weather and then painful.

Kali cyanatum :—Dr. Petroz asserts, that in ulcer of the tongue, with indurated, raised and knotty edges, speech difficult and pains by speaking, this medicine acts very wonderfully.

Kali ferro Cyanatum :—Has relieved bearing down in the uterus, pus-like leucorrhea profuse but not irritating, *sadness*

even to tears, passive uterine hemorrhage with consequent debility. It diminishes the heart beat and causes coldness, vertigo and numbness.

In chlorosis, with puffiness, weakness of the heart, dyspnea and tendency to dropsy, it is of great use.

The medicine is considered as a good remedy in *uterine and lexioms*.

J. K. Maitra.

Gleanings.

By A. N. Mukerjee M. D.

Chloroforming Plants.—Dr. Johnson of Copenhagen, noticing that many plants budded after a period of repose, such as occurs in winter months or even in an unfavourable summer, conceived the idea that by inducing such a condition by means of anesthetics, plants would be renovated, stimulated and rendered capable of developing buds with greater vigor. Experiments with lilacs, lilies of the valley and azalias confirmed the theory.

A Comparison between medical uses of X Rays and the Rays from the salts of radium.

The rays from radium salts unlike the X rays, are not serviceable in diagnosis either by means of radiographs or fluoroscopic examinations. The beta rays are useful as a therapeutic agent in certain skin diseases and new growths, if the diseased tissues are superficial or are not more than about one and one fourth centimeters ($\frac{1}{2}$ inch) below the surface of the skin or accessible mucus membranes. The beta rays from radium salts will heal some case of new growths that are not healed by the X rays, and they act more promptly but not over so large a surface at one time as the X rays. Radium salts of an activity of 8000, or considerably more, are not sufficiently

strong to be efficient. Pure radium salts, which have a radio-activity of about 1,500,000, are not too strong for the work to be done. The radiation from radium salts, unlike that from the X ray tube, is uniform. Great care should be exercised to avoid burns. T. H. Williams. (*Boston Medical and Surgical Journal*).

The action of Cobra poison on the nervous system. Dr. George Lamb, of the Indian Medical Service, and Dr. Walter K. Hunter, of the University of Glasgow, published in the *Lancet*, a preliminary account of some experiments made in animals with cobra poison. The object of the experiments was to show what influence of a direct nature the snake poisons have on the nervous system, and to decide whether the cause of death in poisonous cases is due to the action of the venom on the blood, as maintained by Cunningham, or whether it results from a primary action of the poison on the internal nervous system. Six monkeys and three rats were used for the experiments and were killed by subcutaneous injection of cobra venom, in doses ranging from 25 milligrammes to 100 milligrammes per kilogramme of the body weight. Microscopical sections were made of the various parts of the brain medulla and cord.

The result showed degeneration of the cells of the anterior horns in both cervical and lumbar enlargements of the cord. In the pons and medulla, the 12th, 10th (motor and 7th nuclei all contained a considerable proportion of abnormal cells. The vast majority of the pyramidal cells of the cortex showed commencing degeneration and in the cerebellum not one normal Purkinje cell could be found. The vessels to these parts were considerably dilated and in the cord some small hemorrhages into the gray matter were seen.

Thus they conclude, that in cobra poison there is a tonic substance, which when injected subcutaneously, produces symptoms of muscle paralysis and that when we examine the

nervous mechanism which controls these paralyzed muscles there is found to be evidence of such degenerative changes as are known to be so frequently associated with paralysis. It seems fairly certain therefore that cobra venom has a direct action on the motor neurosis. We cannot but conclude that it has a specially selective action on the nervous system, and that it is from this that death ensues.

Æsculus Hippocastanum.—Many cases of neuresthenia take their origin in the rectum, the symptoms being reflexes from disease of this part. When this is the case they will find their remedy in *Æsculus*. Amongst such reflex paræsthesia "exaggerated sensitiveness to cool air, especially the respiratory mucus membrane," is note worthy, as it gives rise to cough which is hoarse, harsh and dry with cold feeling of inspired air and aggravation from deep breathing like *rumex crispus*. This cough is, when calling for *Æsculus*, invariably reflex from organs involved by portal congestion. It often occurs as a persistent laryngo-tracheal cough after the gastric form of influenza. *Æsculus* has no direct action on mucus membranes, it produces no inflammatory lesions, is rich in nerve reflexes, and low arterial tension is always present when *Æsculus* is the remedy. Dr. Laird employs the 1x and 3x dilution. (*The Clinique*.)

Obstetric emergencies—Homeopathic Treatment.—C. E. Fisher contributes a paper based on practical experience, in which he reports that in Homeopathy pure and simple we have the best weapons for obstetrical emergencies.

Dystocia—Rigidos.—Women of dark complexion, rigid fibres, rheumatic diathesis. *Cimicifuga* 2x twice daily before labour and every 15 minutes until dilatation is well advanced.

Caulophyllum is indicated when the pain is more in the pelvic region compared with *Cimicifuga* for pain of the back. The *Caulophyllum* pain is sharper. The patient suffers more and is more irritable. *Pulsatilla* will often change the position

of the head through its influence on the presenting part. Dr Fisher gives higher dilution down to 6th. *Chamomilla*—is indicated in certain states. An unyielding cervix patient mildly irritable, strung up, highly sensitive and fretful, or hot genital canal sensitive, it is to be given in high dilution. *Belladonna* is *Chamomilla*'s twin, but *Belladonna* is more erratic and violent of the two. A flushed face, aching head, injected eyes, hot and dry throat through effort and mental despair combined are indications. The pains come and go suddenly. Dr. Fisher recommends higher dilutions.

(2) The second stage of labour *Ignatia* and *Aconite*, help the temperament at the difficulty of *despair* and *depression*.

(3.) *Hemorrhage during labour*.—*Sabina* in uterine inertia flow profuse and in parts, hot, and bright 3rd dilution.

Ipecac.—With all the symptoms of relaxation and collapse it seems to act as a stimulus to solar plexus. Thinness, *salowness*, lethargy, freckles, dryness of skin, catchy breathings, deep sighing respirations, with relaxation of anus. *Phosphorous*—high.

Irritability florid complexion, tension hot red blood, for Nitric acid—low.

(4) *Puerperal insanity*.—*Tarentulla* should be remembered in amelioration from music. *Ignatia*—in hysterical and emotional cases. Sorrow, imaginary or real is the keynote of *Ignatia*. *Hyoscyamus* in lascivious expression. *Stramonium* in violence of language and action with jealousy as an emotion, visual hallucinations, all delirium being worse at night. *Aurum* is indicated in after stages when the patient is safely well, when the mental depression overpowers her and she wishes to die.

(5) *Puerperal Eclampsia*—subject to attention required according to stage, violence and cause of the convulsions, *Cicuta*, *Belladonna*, *Atrophia*, *Strychnia*. *Zincum* and *Gelsemium* may prove of service. *Violence and tonicity*—are characteristic of *Cicuta*. *Congestion* and opisthotonus of *Belladonna*. *Rigidity*

with contortions and twitching, indicate Strychnine. Zincum comes in for clonus, constricted throat and long drawn contractions without tonicity. *Gelsemium* is called for in convulsions of milder type though similar to those of Belladonna.

In diarrhea only at night think of *Pulsatilla* and of *Petroleum* if only in day time.

Book Notices.

Life and Work of James Compton Burnett, M. D., with an account of the **Burnett Memorial** compiled by *J. H. Clarke*; published by Homeopathic Publishing Company, 12 Warwick Lane, London.

The late Dr Burnett is very well known to the Homeopathic section of the Medical profession of the world. He was an enthusiastic worker in the field of medicine, and devoted the best portion of his life in writing books on various subjects of that science. The above work commences in the frontispiece with a very nice portrait of Dr. Burnett. The book is full of information about the life and work of the late doctor. We recommend our readers to buy that book and read it through. It is certainly a delightful and profitable reading.

In the preface it is intimated that the proceed from the sale of this book will be devoted to the teaching of Homeopathic Practice in London under the British Homeopathic Association. The chair will carry the name of Dr Burnett.

Great credit is due to the Publishers for printing, papers and binding. Our sincere thanks are due to Dr. & Mrs. Clarke for taking so much interest in the fitting memorial of late Dr Burnett.

A Syllabus of Diagnosis, being a series of question based upon a work of clinical medicine by *Dr. Clarence Bartlett*, and a course of lectures in physical diagnosis by **Dr. E. R. Snader**, prepared by *W. F. Baker, M. D.*, Clinical Instructor of Medicine in the Hahnemann College of Philadelphia, Pa. Published by Boericke and Tafel. It is an useful book for students and busy practitioner alike. We recommend this little book to the students of our Homeopathic Schools in Calcutta.

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ওলাউঠা চিকিৎসা	৬০
প্রথম গৃহ চিকিৎসা	১০
স্ত্রী চিকিৎসা	১০
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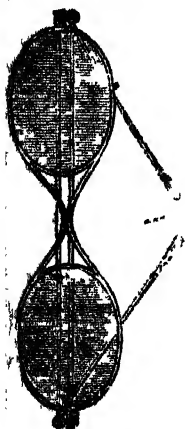
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences

Vol. XIII. |

JULY 15, 1904.

| No. 7.

Pneumonia.

Pneumonia is a formidable disease but its treatment according to Homeopathic method is so excellent and so devoid of any danger that our allopathic brethren speak of its treatment as expectant. One of our American editors (Allopathic) candidly confessed their total inability to do anything in the shape of a cure in the following words —

The doctors have no remedy for pneumonia. This is fairly and squarely admitted by Dr. Arthur D. Bevan who stands high in the medical profession of Chicago.

This doctor stood up before the Chicago Medical Society and said that drug treatment is useless in case of pneumonia. The whole medical profession, so far as medicine is concerned, can be of no assistance in the treatment of pneumonia. The sooner the profession acknowledges this to the public the better it will be for all concerned.

This is what Dr. Bevan thinks and this is also what every other educated and honest doctor will say. The reason doctors do not come out in public and acknowledge the foolishness and futility of drugs is because their vocation will be injured by doing so.

If people only knew how little good there is in drug, they would rarely employ a physician except when some surgery is necessary. If the people could only hear what the doctors admit to each other, they would very quickly get over the notion that the doctor has any remedy for pneumonia, typhoid fever, smallpox, scarlet fever or any other acute ailment.

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The doctor is always sent for. He comes and goes through the motions of giving something, but, with the exception of the homeopathic doctor, he has little or no faith in his own drugs. The true homeopathic doctor honestly believes he has a specific for every symptom of every disease. But the drug doctors, which include the allopaths, the eclectics and the physio medics, not only have no remedy for pneumonia but they have no remedy for any other acute ailment. They know this just as well, as we do. The only difference between us and the average doctor is that we can afford to tell tales out of school and they can't.

This is a frank and candid acknowledgment. Our readers will be good enough to observe how different it is in our Homeopathic literature.

Pneumonia may be successfully treated with a few remedies of our Materia Medica. When the indications are clear the action of our remedies is prompt and permanent, Belladonna, Bryonia, Lycopodium, Mercurius, Phosphorus, Rhus tox and a few others are all that we require to combat a most formidable case of Pneumonia. Of course a few others are to be brought into requisition in complications and some other directions of the disease. Along with these we must mention of Aconite and Sanguinaria.

There is a good deal of dispute among our physicians about the use and efficacy of Aconite and Belladonna in the first stage of the disease. Some say that Aconite is the only remedy that can cut short the disease in its infancy if administered in the right time, others are of opinion that Aconite has no place in the disease but Belladonna is the right remedy in the beginning.

In our opinion, we must be guided by the symptomatic indication and not by pathological speculations. The symptoms of these two remedies are so distinct and characteristic that there should be no mistake in finding out among them.

Muller's symptoms quoted by Dr. Baehr are all sufficient for our purpose. In Aconite, intense fever, preceded by chill with burning heat and dryness of skin, quick hard pulse,

accelerated, labored and incomplete respiration with restlessness, anxiety and palpitation of heart; stitches in chest during deep inspiration and motion; dry racking cough with small quantity of tenaceous, slimy and blood-streaked or rusty expectoration, great thirst, scanty and red urine and evening exacerbation of symptoms.

This is a true picture of Aconite in cases of pneumonia.

The symptoms of Belladonna are quite distinct from it. There we can find fever with small and frequent pulses, skin moist or perspiring, no restlessness, on the contrary soporous state, dark red or bloated face, intense headache, delirious talks and even convulsion.

Bryonia is a very useful remedy in cases of pneumonia complicating with Bronchities. In fact, it is in Broncho-pneumonia that the curative influence of their remedy is more marked, you can say that in the exudative state of the disease Bryonia is indicated.

The fever is less or abates and not of an inflammatory nature, cough troublesome, with scanty whitish expectoration, pains in chest aggravated by movement, tongue thickly coated with white fur, bowels obstinately constipated. Mercurius cases are very peculiar and the remedy is not of a very frequent use. But its symptoms are so clear that a few doses of it is all that is required. Fever is less but continuous, attended with copious and debilitating sweat, urine is scanty and high coloured, there is diarrhea. In hepatization when suppurative degeneration is about to take place, Mercurius is the only remedy that can frequent such miserable state. When properly and in adopted time it is administered the cure is speedy and perfect.

Phosphorus is a grand remedy in Pneumonia, Dr. Flishman of Vienna and some others are passionate advocates of this remedy. The doctor went so far as to assert that a Pneumonia which cannot be cured with Phosphorus cannot be cured

homeopathically. This is a bold assertion which should have no place in the Homeopathic therapeutics. Fever is high, not attended with sweat, pain in chest great, difficult breathing with pressure in the chest, rusty expectoration after great effort. The aggravation of all symptoms in the evening or at nights. In cases of Typhoid-pneumonia Phosphorus is one of our great remedies. Rhustox is the close relation of it in such cases. Phosphorus may be given in all stages of the disease. In fact Phosphorus is suitable in so many cases of this disease that we are to the same belief in certain extent with the Vienna doctor mentioned. Some other remedies are also useful, among them are Antim Tart when the exudation is profuse and loose, when perspiration copious and cold, heart action is weak.

Sulphur is useful in later stages of the disease and when reaction is tardy. Great care should be exercised in administering Sulphur in Pneumonia. It often leads to serious complications if improperly used. Lycopodium is our great help in chronic cases. If given in time it prevents the tendency to Phthisical degeneration of the case.

Our Sanitary Stations.

Within the last 10 or 15 years there has been a considerable increase in the number of people who are obliged to take a change to a more salubrious climate, at least once every year. Indeed, the climate of Calcutta with its overcrowding, dirt and smoke, has become so deleterious in its influence upon the large majority of its inhabitants, that they are unable to keep up a decent and workable standard of health, without a periodical stimulation of vitality from residence in some healthier atmosphere. Orthodox and conservative people are apt to look upon this universally adopted temporary

sojourn as one of the fads of modern life in imitation of Western ideas ; but to my mind it has become a distinct necessity on account of the general deterioration of health which is noticeable among the men and women of Calcutta. Our middle class gentry who earn a competent living by severe toil all the year round, require an overhauling of their exhausted organism by means of bracing purgair of sanitary stations. To them, this going for a change has become so imperative, that almost everyone of them has now got a house of his own in one of the health resorts of the vicinity. And besides, the constant disease of some one or other of the family often compels the father to remove them for some time to one of these localities, even at the expense of considerable money and trouble. For the sake of convenience, they do not venture to go to distant places and they generally prefer stations, at the distance of two or three hundred miles from the town which can be reached by a short journey of 10 or 12 hours.

Speaking generally they obtain the desired effect by a temporary sojourn at the health stations ; but various causes contribute to a failure in many cases. I know of men who have derived no benefit at all, or who have come back in a much worse condition than when they left Calcutta. It is not possible in all these cases to point out the exact cause which led up to the unhappy result ; perhaps the selection of the particular station was unsuitable to their special constitutions. But in my opinion, dietetic irregularities form the principal factor of a failure in many instants. Being a confirmed "air eater" myself, I have come across numerous men indulging in injudicious feeding of some sort or other, whose health is not improved in consequence. Being in a better climate they expect their stomach to digest all the heavy and unaccustomed foods which is thrust into it ; and no wonder that the poor stomach rebels against such tyrannical treatment, and leads to

symptoms of digestive disorder. The best and wisest way of improving one's self in those places is to stick to his accustomed diet, at least for the first few days, and then to increase it gradually and slowly as his appetite is increased in proportion.

Of all the places selected for a change the little towns in the Sonthal Pergannas are very frequently resorted to by our "air-eaters". They comprise Jhaja, Simultala, Baidyanath Junction, Deoghur, Madhupur, Giridih, Karmatar and Jamtara. Within the last few years, they have become so very important places, that to take only one example, Madhupur, which was only a desert 20 years ago, has grown up into a town of about two miles' length. The essential nature of all these stations seems to be alike, and they all contain iron and mica in their water. The western breeze is very salubrious. I have personal experience of almost all these places, and from what I have gathered I can safely say that in point of healthiness Simultala and Jamtara are the best two of the whole lot, and Madhupur is the worst. It has been pretty well established that with the increase of population, the healthiness of a place is diminished proportionately. The kind of ailments that are likely to be benefitted at these stations in the Sonthal country consists of cases of nervous weakness, old fevers, old spleen and liver enlargements, and all those disorders which require a general tone to the system. But the digestive troubles which give rise to costiveness or loose motions and formation of gas within abdomen do not generally improve at these towns. The lung disorders may be benefitted, but not in the coldest seasons of the year. There are two very good towns on the river Sone, Koilwar and Debri, which are now and then resorted to by health-seekers, which give a large amount of benefit to dyspeptic people. The water of the river Sone has a splendid digestive property; but I am sorry to observe that within very recent times, the climate of Koilwar has been contaminated by a slight tinge of malaria.

Of other neighbouring places, Darjiling, and Kurseong are two hill stations which are frequently visited by people in affluent circumstances. But their costliness of living, difficulties of passage and other considerations prevent men of moderate means to take advantage of their good climates. These places have a tendency to bring on Hill diarrhea and dysentery specially in persons of relaxed bowels; and those that are suffering from weakness of chest should better avoid these colder regions. They have been known to do good to certain constitutions to a remarkable extent, especially in those whose nervous system has been wearied out by constant worry and overwork. Diamond Harbour is a very near place whose claim to a sanitarium is scarcely recognised by the general public. But from my own experience I can confidently assert that in the hot months of April and May, the climate of this place can produce a salutary effect upon those whose health is below the par. The Hon'ble Justice Chandra Madhab Ghose is very fond of this little town, which has a most delightful situation on the banks of a very broad river.

The recently opened Bengal Nagpur Railway has exposed some very healthy stations in the Orissa Division of which full advantage may be taken by men whose digestive power is more or less defective. They are Balasore, Bhadrak, Cuttack and Puri. I have personally tasted the efficacy of these places which in my opinion will prove excellent health resorts in the near future. The water of Salandi which flows by the town of Bhadrak has remarkable digestive properties; but want of good houses makes the place useless for the present. Balasore is a most promising locality on account of its close proximity to the sea-coast, which is only six miles distant from the Railway station. The Europeans have felt a great attraction for this historical town as it will afford the shortest and most convenient sea-coast trip from Calcutta

and I have no doubt that within the course of 8 or 10 years they will built a first class sanitarium in Chandipore the little sea-coast town from Balasore. The sea-beach has a natural fascination to the European mind which will do all it can to bring it within its nearest reach. The fame of Cuttack and Puri has already travelled far and wide and I need not dilate upon it any longer. But it is a matter of sincere regret that Malaria has stealthily crept into the holy city of Puri and has made its usefulness a matter of doubt to many persons. But to my mind the selection of a dwelling house on the sandy sea-beach can and does prevent all fear on that point. The majestic sight on the rolling waves, the most refreshing sea-bath and the magnificent temple of Jagannath are its intrinsic charms which cannot be lightly ignored. People suffering from dyspeptic disorders or asthmatic troubles of the catarrhal variety should do well in taking a trip to one of these Orissa towns.

Lastly there is Waltair lower down in the B. N. Railway, which is something like *Dilhia-ka-laddhu* of Calcutta men. But as I have no personal knowledge of the place and contradictory reports reach me from men who have been there I cannot venture an opinion on the merits of Waltair. There are many more healthy towns all over India which are all more or less distant and which on that account are generally avoided by health-seekers.

Nripendra Nath Set. L.M.S

The Need of Hygienic Education.

(Continued from Page 117.)

As we have shown that the human system is governed by the influence of surrounding objects in harmony with the universal laws of nature, so the sun, the moon, the star, the day, the night, the season, the air, we breath, the soil

we live on, the kind of food we eat, our passions, our grief and joy etc., every action of ours and every object with which we come in contact—all these have influence upon us; we see then that multifarious influences continually work upon us in obedience to certain eternal laws so as to enable us to preserve our health and prevent the inroads of disease. Hence the infringement of any of these natural laws inevitably brings on disease, for which reason it is much more difficult to cure a disease than to prevent it, which agrees with the golden proverb *that preservation is better than cure*. Moreover the older the physicians grow, more sceptic they become of the virtue of drugs. To state clearly the opinion that is steadily growing among medical men of the present century upon the virtue of drugs we can not do better than give it in the words of Dr. J. H. Kellogg, M. D.—“Great harm is done by the indiscriminate and wholesale use of drugs, which is so common at the present time. There are very few drugs which are not more or less poisonous in character, and the majority are deadly, except when taken in small doses. Those who use drugs should recollect that they are harmful, not only in large doses, but in small doses, when long continued. Quite a large proportion of common remedies, such as quinine, “blood purifiers” of all sorts, bromides, iodides, etc. are productive of much harm, unless scientifically used. An immense amount of injury is done by the use of patent medicines, nearly all of which are composed of harmful ingredients, and which, so far as our observation goes, which is quite extensive, are capable of doing great mischief. •

“It is a favourable omen that the better class of physicians, especially those who have had the advantage of a course of medical study in European hospitals, where they had the opportunity to watch the practice and listen to the teachings of the highest medical authorities in the world, use drugs far less freely than formerly. More reliance is placed upon proper diet

and attention to the general habits of life ; to the removal of the causes of disease, rather than the mere mitigation of the symptoms. There is no question but that diseases have been vastly multiplied by the multiplication of medicinal remedies. In a community where doctors are plenty, drug diseases are generally almost as numerous as disorders which arise from natural causes."

Although the different systems of drug medicament differ one from another in the mode of preparations and administration according to the different theories of health, disease and the healing art, but they all agree in this common fact that hygiene forms the main basis of all sorts of treatment.

The physicians of the different systems along with their treatment by drugs prescribe certain hygienic rules to be observed by every patient under their treatment. Moreover it is a common belief among physicians that unless proper hygiene be observed by the patients the prescribed medicines become less efficacious and sometimes altogether useless in bringing about the effect aimed at, and also it is a generally admitted fact that even fatal diseases are sometimes cured by mere hygienic treatment and on the contrary even a simple ailment sometimes becomes a fatal one by improper hygiene.

Now the value of the hygienic treatment needs no further elucidation. Physicians of any system more or less are hygienists. The great drawback of successfully carrying out the hygienic treatment is that a very, very long time is required everyday by the physicians for each individual case, and at the same time, unless suitable apparatus be within easy reach of the physician, the required effect on the patients cannot be obtained. To procure these apparatuses by importation from Western Countries requires an enormous outlay of money and sacrifice of time. A well-regulated supply of air free from dust and soot and other obnoxious gases is essentially required in some special cases, but it can hardly be secured in a large

town specially in thickly populated quarters. Another great drawback in this treatment is the selection and the cooking of the invalid's food. There are many popular errors regarding it even among many physicians which will be discussed later on, but it will suffice here to mention that the careful selection and cooking of food should be guided according to the recent advancement of science, which in our private household, it is practically very difficult to manage properly as is known to every thoughtful physician. Besides these there are various minor difficulties to overcome according to the requirements and the sentiments of each patient.

Under these circumstances we appeal to our countrymen rich and poor, patient and physician by their combined efforts to start at once a hygienic sanitarium with both indoor and outdoor arrangements for the treatment of persons of broken health and suffering from the so-called incurable diseases.

P. N. Nandi.

A Case of Epilepsy Cured.

A young boy, aet about ten years, had epileptic fits. When he was three years this fit was brought on by a fall on his head from a cradle. He was treated and cured for the time being.

He was in fit again in July 1901. Had Allopathic and *Kabiraji* treatment for about two weeks but to no purpose when he came under me.

He was a tall and healthy boy of keen mental state. No defect of any kind could be visible in any part of the body. This time the fit brought on by a chastisement from his father owing to his neglect of study. The first attack was cured by simply sprinkling water on the face and head. The second attack took place at night when inhalation of amonia brought

him to senses. I was called in the morning when the fit was again repeated.

I found him in an unconscious state with closed eyes and clenched fists. Face bluish red and complete unconsciousness, convulsive twitchings of the limbs. I gave him a few doses of Nux vom 30 every four hours. In the evening I was called again. The patient was worse, fits frequent and severe, and he talked and behaved like a madman.

Twitchings of facial muscles, face livid as if swollen, lock-jaw and complete stupor. One fit was followed immediately by another, so there was scarcely any interval. He was sometimes in his senses when he said that he perceived peculiar sensation in his stomach.

There were nausea and vomiting, no food could be retained and bowels and obstinately constipated. There was history of worms. Breathing rapid, irregular and stertorous in character, foam at the mouth.

Absinthium 6x one dose every three hours during the cessation of fits. Three doses were given and much relief. This remedy was repeated off and on for a few days and complete cure was effected. He had no more fits for the last three years and is prosecuting his studies well in the school.

An Argentum Nitricum Case. In the summer of 1897, I had to go to a distant part of the country by rail from Calcutta. It is a sanitarium where I had to stop for a few days, say about three weeks.

Once on walking in the vast field from our abode I found a withered and dried up looking man groaning in the roadside with both hands in his abdomen.

I enquired and found that the man was suffering from colic for a long time and he came here for a change but found no benefit. He was there for about three months when I met him.

On enquiry I was told that he had a severe colic and

dyspepsia for a long time and was treated by all pathies without the least benefit whatever. It was a case of acidity and colic as diagnosed by one allopathic doctor and he took various antacid remedies.

He has a very distressing and painful attack before us. We took him to his place and I undertook his treatment.

He had pain in stomach, the pain he described was of a cutting and digging nature, sometimes burning.

Pain commenced in the pith of the stomach and extended in all directions. It goes on to the back, on the sides of the spinal column opposite the naval region. When pain increased in its highest extent, he became almost senseless and it took away his breath. He said he can not breathe at the time and was in danger of death at that very moment.

Eruclatations were frequent and loud, and that gave him some relief. Pressure on the abdomen had very slight amelioration. He could not take his food well. He had a great desire for sugar, but that had aggravated his ailment. He was losing flesh for the last one year and some physician told him that he had gastric ulcer which is incurable. I gave him Argent nit 200, one dose dry on the tongue and after quarter of an hour's time he got relief and sleep.

I left him with direction to inform me if pain recurred, got no information that day and in the next morning he came in, and asked me to give him more of that medicine. It was like magic he said that took away the pain. A few doses of Placebo were given and he was perfectly cured.

It is simply marvellous as one dose of Argentinum nitricum has cured such a bad case of colic. He remained there for three months more and at the expiration of that time he regained flesh and became quite a new man.

P. C. Majumdar, M. D.

The Nature of Diseases and their Treatment.

Of all the cases that we are called upon to treat, many would get well of themselves. These have been named self-limited diseases. Then there are cases which require the help of medicine to be cured, then again there are cases which could get well by hygienic measures. It is also the miasmatic and epidemic diseases that requires medicine to be corrected, for as a rule the vitality is so far run down or is in such a vitiated condition that it is impossible for nature to do any thing here inspite of her best efforts. It is all important for physicians to know from the beginning to which of the three class I have enumerated, a certain case of disease belongs, that he has been called upon to treat.

If it is a self-limited disease, the less medicine he uses the better, for it will not only be useless but at times very harmful. To draw up conjectural causes of disease and decide the plan of treatment accordingly is at times fraught with the most disastrous results. For instance a patient has fever and declares that he is very constipated. The deduction is at once drawn that there is an amount of fecal matter accumulated in the bowels and that has set up the irritation and caused the fever. The physician at times does not even wait to examine the abdomen or enquire whether he is habitually constipated or not. He is given a strong purgative; the bowels are not moved or even if moved affords no relief to the patient. Moreover now it really creates a certain disturbance in the bowels, perhaps sets up an inflammation and the result is, the fever rises higher than previously. Then again there are cases where there is an acute pain which becomes very difficult to relieve. The conclusion is at once drawn that there is a quantity of blood accumulated and at once lee-

ches, cuppings and such other tormenting measures are suggested, and generally the patient is bled to death if better counsel do not prevail. I have known of instances where as many as 20 to 30 leeches were applied with the result that the patient was exsanguinated to such an extent that the patient died from the effects thereof. In these cases I should say that discretion is the better part of valour. In self limited diseases Homeopathic medicines may be used with advantage to alleviate pain and suffering but even these should be administered in small quantities and at very long intervals.

Of the cases that are amenable to hygienic measures a few words may be said with advantage. A physician is like a mechanic. He must have good instruments, he must be able to understand his work, he must know thoroughly well how to handle his instruments. Here is an engineer or a mine-worker that is suffering from a cough that is very harrassing and prostrating. He is under your treatment, he takes your medicines, he improves for a time then he gets worse again. Nothing seems to have any permanent effect on him. All you have to do in such a case is to advise the man to leave his work and unless the mischief is too far gone he will get well without any medicine. Often he will declare, how is he going to make a living if he gives up work. In such a case you tell him that if he wants to live he must not make a living in that way. At times you will get a patient who will say that she suffers from no particular disease but that she has been loosing flesh steadily, although she eats well and has no other complaint. She moreover states that she has taken many medicines but to no effect. Then you examine her and find that all the organs are in proper order, she has no fever, no aches or pains of any kind. Then you enquire about the menstrual function and you are told that her menses are scanty and delayed or perhaps she has not menstruation at all ever since the birth of the baby. Then you say, hallow ! how is this ? How old is baby ? Oh it is about 15 months

old. Do you still nurse the baby? Yes doctor, I am very fond of the baby and still nurse him. You tell her at once that she has got to wean the baby if she wants to live and you will find that she will at once begin to improve in health without the intervention of any remedial agent whatever. Here is a case of chronic dyspepsia with diarrhea that has baffled the skill of the most eminent physicians. You tell him that he must be very careful as to his meals. He says that he is. There you tell him that he must have his meals regularly at the same hour everyday. That he is unable to do for some days he returns home very late. All right, let him fix a late hour for his meals everyday and if he returns home earlier than that hour let him wait till that time and take his meals at the same hour everyday. Let him give up acids and highly spiced things, coffee, tobacco &c, and give him a few doses of the indicated remedy and he will improve in no time. In the experience of a physician we find that in many a case that comes under our treatment a proper understanding of the functions and activities of all the organs of the body is absolutely essential and is often able to effect the most wonderful cures without the intervention of medicines.

Then it is only the miasmatic and epidemic diseases that require the help of medicines for a case. An apparently healthy man is attacked with cholera, typhoid fever, plague and the like. Here the selection of the remedy is of paramount importance for it is simply impossible to bring about a case without the help of medicines and the selection of the right remedy will often work wonders. But alas, here again you will at times be baffled, your best directed energies will count for nothing. Hahnemann himself says:—Then perhaps even under the operation of the Homeopathic remedy which seemed best adapted and even where the mode of living had been quite correct, new symptoms of disease would be added which could be removed only inadequately and imperfectly ;

yet these new symptoms were at times *not at all improved*, especially when some of the obstacles above mentioned hindered the recovery. Then again there would be chronic maladies where the apparently well-selected remedies would fail to have any effect.

For the causes of such diseases we shall have to go still further back and take the history of the case from the beginning and in so doing we shall find that the causes of the disease lay in some hidden miasm, of which I will have occasion to speak later on, which will have to be eradicated before a case can be cured. Hahnemann mentions of these principal measures in his "Chronic Diseases," which no doubt is the cause of many, if not of all, of the diseases that fail to improve under the apparently well-selected remedies. Here a thorough knowledge of Psora, Sycosis and Syphilis and the remedies thereof is absolutely essential.

J. N. Majumdar. M. D.

Notes on Materia Medica.

(Continued from page 140.)

Kali Muriaticum :—It is prepared by trituration. We have got no evidence of direct form of this medicine but the indications are mostly gathered from Schussler and from clinical observations. From these we have found it to be useful in many affections of the eye, ear and throat.

The following are the brief summary of its indications:—

(1) The eye:—Parenchymatous Keratitis and ulceration of a low type. Photophobia—there may or may not be pain and lachrymation, the base of the ulcer is dirty, yellow and exudes a white mucus, there is a tendency of spreading from periphery.

(2) The ear:—Deafness from swelling of the eustachian

tube and the external ear ; catarrhal inflammation of the middle ear with thickening of the membrane sensation of noises in the ear and stuffiness.

(3) The throat :—In diphtheria, tonsils swollen and inflamed, greyish spots and ulcer in the throat, *swelling of the glands about it*. Over and above these we have found clinically its effect in dyspepsia with *white tongue*, in pneumonia and in pleurisy.

It has also the stomach symptom of pain after eating, indigestion with whitish mucus vomiting and waterbrash in the mouth.

Dose :—The lower dilution is preferable.

Kali Phos :—It is prepared by trituration.

Not much of direct proving except some clinical observation :—

It has been seen to be useful in troubles of the nervous system, in muscular debility following acute diseases and in Neurasthenia.

Kali Phos : patient is gloomy, irritable, fretful and cross, most trifling thing annoys him. His mind is not at rest but always wanders after some unknown things or events.

The Typhoid symptoms are more marked here : dry, brown tongue, foul and proteid diarrhea, great debility and low pulse, breath offensive and sordies on the teeth, also great mental depression and delirium.

In enuresis or wetting the bed where it is due to a paralytic or paretic condition of the bladder or from nervous debility and where there is inability to retain the urine, its action seems to be much.

Besides these we have seen that Rheumatism, *which is worse after rest and on just commencing to move*, is cured by its application.

Rhus Tox is analogous to it in the rheumatic symptoms.

Dose :—The lower one.

Kali Sulph :—It is prepared by trituration. No regular proving except Schussler's observation :—

General sphere of action :—corresponds to the third stage of inflammation, yellow mucus discharges, skin affections &c.

Special action :—

(1) In its action over the respiratory system we see, there is cough with great *rattling of mucus* on the chest, the cough is worse in a warm room and relieved in the cool open air.

(2) In Rheumatism the pains are of a shifting or wandering character and are worse from warmth.

(3) In Ophthalmia when there is a discharge of pus, crusts on the eyelid.

Pulsatilla is most like it in its symptomatology.

Dose : The lower one.

Kali Bromatum :—The use is not much to be seen. We have acute mania with violent symptoms ; cerebral deprations for its some indications. It has been seen also to produce blotches on the skin somulating acne. Besides these we have nothing much to say about this medicine for the present.

Kali Hydro :—The only symptom to which this medicine acts prominently are :—acrid, watery discharge, eyes smart and lachrymate. *The patient is alternately cold and hot* and there is sorethroat.

With these we finish all the preparations of Kali (Potassium) which are found applicable to our Homeopathy.

J. K. Maitra.

To be continued.

Gleanings.

Conducted by A. N. Mukherjee, M. D.

Wilson's guide of Arsenic and Ferrum in the treatment of Anemia :—Iron is valuable in those Anemias which show a decreased hemoglobin with red cells normal ; and when the

red cells themselves are marked by low, then Arsenic is the supreme remedy. The count of red cells, then becomes a reliable means of determining the need of the latter remedy.

Lytopodium.—Dr. W. J. Hawkes thinks that this remedy will always benefit the patient having three or more of the following symptoms no matter what the ailment :—

1. The aggravation of all the symptoms between the hours of 4 and 8 p. m.

2. Pain in the renal region aggravated by undue retention of urine and relieved by passing the urine.

3. Reddish sandy deposit in the urine.

4. Dyspepsia with a sensation of fulness and satiety after eating, although the meal has been begun with good appetite.

5. Audible rumbling of gas in the left hypogastrium.

6. Fanlike motion of the wings of the nose, when there is *no sufficient pathological cause*. — *P. C. Journal*.

Diuretin and Urinary organs. — Dr. A. Mosaner (Karlsbad) proved this agent on twenty one persons presenting healthy kidneys. Four grains were daily administered, as a rule medication was not administered for more than one day. Pot Ferrocyanide and heat test were used in testing albumin. Urinary analysis showed hyaline cast in 20. Slight albumin in 8 (3 with and 2 without casts). The casts were only present transiently and always of hyaline type.

From these experiments it can be fairly deduced that diuretin excites a more or less severe degree of renal irritation and that the protracted use of this drug in large doses may induce evil results, especially in those cases presenting a history of renal disease. It may be worthy of trial in case of albuminuria if employed in small doses according to Homeopathic principles and based on pathogenetic effects.

Magnasia Phos : — It is not a remedy to disappoint if used with exact discrimination. The writer has learned this from clinical experience that when we have the peculiar symptoms

and pains which Schussler long ago associated with this remedy. If we give Magnesia Phos, it is one of the most certain in the whole *Materia Medica*. It does not matter if the pain be the pain of neuralgia, colic or spasm, whether it be of the head, stomach, bowels, limbs or wherever it may be, if not caused by inflammation.—Dr. John Ferran in *Cal. Medical Journal*.

It acts better when administered in hot water.

Editor's Drawer.

In the May number of the *Homeopathic Recorder* a few very interesting cases are reported by our worthy colleague Dr. N. N. Sett. These are cases that are reported by a staunch Homeopath and a graduate of the Calcutta Medical College and we are really glad to find that it is published in an American paper and would be read with interest by our American confreres. These are cases that have been treated and cured with nosodes such as: *Medorrhum*, *Psorinum*, *Syphilinum* and *Tuberculin* and are really interesting. Side by side with this article is published another headed *Abscess Cases* by Joget Chandra Sanyal. Who under the heaven is this Joget Chandra Sanyal? He certainly is no medical man and still his writings find a place in American Journals. Moreover his cases are very peculiar. We did not know that *Lycopodium* was so efficacious in the 3x potency and the grand characteristic is also one that we fail to find in Hahnemann's *Materia Medica Pura* or Hering's *Guiding Symptoms*. Our American contemporaries hardly think thrice before they introduce an article in their paper or else the better class of our writers would cease to write for American papers. In conclusion I only hope that this grand characteristic of *Lycopodium* will not be introduced into the next edition of Clark's *Dictionary of Medicine* or Hering's *Condensed Materia Medica*.

The May number of the *Medical Advance* begins with an article headed "Important changes in the Advance." We are very glad to read this article and shall be very glad to co-operate in the so-called thought exchange.

How to use a repertory wisely has been a subject of discussion for some time and an article from the pen of Dr. J. A. Tomhagan, the renowned teacher of *Materia Medica* and Homeopathics in Hering College, would indeed be very interesting, while the article from the pen of Dr. J. T. Kent, the great compiler of Repertories at the present time, would also be equally instructive. But we must say we do not find it at all interesting to know how simple it will be made in the year 2904. We would like to see it made easier at the present time for we believe in the saying :—Trust no future however pleasant. Work, work in the living present, heart within and God over head.

The Journal of the British Homeopathic Society for April contains several very interesting scientific articles such, as, *Rontgen Ray Therapeutics in general practice*, *Abstract of a paper on the Pancreas &c &c*. These are good readable articles no doubt, but we are afraid they do not breathe of Homeopathy. The only two places where homeopathic drugs are mentioned are in the article "Our drugs in Tabes and Epilepsy and summary of Pharmacodynamics and Therapeutics. Even in these articles we find such things recommended as the use of Calc carb in alternation with Belladonna, Cicuta-six times daily, Strychnia in massive doses &c. The summary contains poisoning by Fowler's Solution, the action of Cobra poison as published in the Lancet, Diarrhea cured by Petroleum (crude) and the like.

If the British Homeopathic Society find nothing more interesting in all the many homeopathic Journals that are pub-

lished in America and elsewhere, it is not to be wondered that Homeopathy has not made more progress in England. At this rate, we are afraid Homeopathy will gradually disappear from English shores and its members will creep into the folds of the regulars.

We are rather amused to note that Dr. Frank Kraft, the able editor of the *American Physician* has devoted nearly half a column in criticising an "ad" that appears in the *Indian Homeopathic Review*. We have nothing to say against Dr. Kraft for what he has said and will leave our Manager to answer the doctor's queries, but we only hope that Dr. Kraft did not think that the Editors of the Indian Journal were great believers in the vitalizing power of the Vitaline, or that they recommend it wholesale to all their patients. It is also much to be regretted that the Editor of the *American Physician* did not find something more readable or remarkable in the pages of our Journal.

Repertory of the Mind.

By Dr. B. B. Chatterji of Benares.

(Continued from page 129.)

All-day, Trembling, anguish and fear, as if some accident would happen ;—; relieved after going to bed. Magn-Carb.

All-day, weeps—; cannot calm herself. Lycopodium.

All-mental excitement increases the suffering. Cistus-Cans ; Kobalt ;

All-mental or physical exertion. Dislike to—; Cinchona ;

All night. Anxiety, hopelessness,—; Lithium Carb ;

All-night ; Cusses—; and complains of stupid feeling, with headache and ptalism : Vera-alb.

All-night ; restless—; Stubborn, Disobedient, longing for dainties ; face pale or at times red ;—; children. Cinchona.

All the time. Uneasy and distressed —; Child does not want to be touched ; cannot bear you to come near it ; desires many things which it refuses when offered ; is not pleased or satisfied with anything ;—; Cina ;

Allow ; The child will not—; itself to be touched without whissing and crying. Anti-T :

Allowing no rest at any employment ; Anxiety : as if she had committed a crime. Chelidonium.

Almost prophetic perceptions ; mental excitability with—; Quick comprehensions ecstasy. Lachesis :

Alone, Afraid to be—; especially at night. Camph.

Alone. avêrse to being—; Aversion to man, and yet —; Conium.

Alone ; being left—; poison, or being poisoned or sold. Fears :—; Hyos ;

Alone. Can not bear to be left—; Vera-alb ;

Alone ; can not bear to be—; Mania : for light and company ;—; runs about ; rage ; proud, haughty ; merry exaltation. Stramo.

Alone. child fears to go to bed—; Full of timorous fancies, evenings,—; Causticum ;

Alone. Desire to be—; Ign ;

Alone ; Desire to be let—; conversation is unpleasant. Helonias.

Alone ; Desire to be—; she is sad, reflective ; avoids conversation, taciturn. Carbo-ani ;

Alone ; Desires to be let—; irritable, sensitive. Gels ;

Alone. Dread of being—; Sepia.

Alone, Dreads being left—; lest he should be very nervous. Anti—Tart.

Alone; Fear of being—; but disinclined to meet even agreeable company. Clematis ;

Plague.*

India has been unfortunate in having so many of the malignant forms of disease affecting the health of the country in a considerable degree.

Cholera and smallpox have been epidemic from time to time, and at the present time may be considered to be endemic particularly in the larger cities. The last, but by no means the least of these visitations that we have had, has been the plague or the *Levantine Scourge*, which is causing such a havoc through out the length and breadth of the country to-day.

Some eight years ago plague seems to have made its appearance in that beautiful city of Bombay, whence it spread like wild fire throughout the whole of India, in spite of the efforts of the Government to check its inroads into the country. In a short time it made its way through the whole of India and now causes a mortality that is unparalleled in the history of epidemic diseases. From Bombay Presidency it spread as far as Punjab and the North Western Provinces and thence into Behar and Bengal, and thus attacked our fair city of Calcutta.

Plague as described by Manson is a specific inoculable and otherwise communicable epidemic disease common to man and many of the lower animals. It is characterised by fever, the development of buboes, a rapid course, a high mortality and the presence of a specific bacterium in the lymphatic glands, viscera and blood.

It used to be held as a maxim that plague never appeared east of the Indus; nevertheless it has been observed during this century in more than one distinct centre in India.

* A paper by J. N. Majumdar, M. D., sent to the American Institute of Homeopathy for the last sessions held at Niagara Falls, U. S. A.

So long ago as 1815 the disease appeared in Gujrat, Kathiwar, and Kutch, *after three years of severe famine*. It reappeared the next year in these parts but disappeared the year after and was not heard of till July 1836, when the great epidemic broke out in the town of Pali in Marwar in Rajputana. It spread from Pali to the province of Meywar, but died out spontaneously in the hot season of 1837 and has never been heard of again in that part of India till the present time. That uncleanly habits have much to do with fostering the disease is a historic fact.

It is principally a disease of tropical climates especially where the soil is saturated with animal excreta which do not find proper drainage, so that it is found in places where large numbers of people dwell in congested areas under insanitary conditions with deficient light and air supply. But still nothing as yet has been found as to the causes that lead up to a plague epidemic. The belief that filth is the principal cause of the disease is still so strong that the tale of the plague in Mesopotamia as depicted by Colville so long ago may well be repeated here. "The ground is so saturated with moisture that the refuse of the village is neither absorbed nor evaporated but acquires the form of a bluish black oily fluid which surrounds the huts and covers the paths and stains the walls two feet from the ground; and in fact the village is in such a state of filth that it requires to be seen to be believed". Of the plague that is raging now in India the same story holds good. Moreover it is observed that plague has caused more havoc among *Marwarees* and other low class people who generally live in large numbers in very small houses with an amount of negligence to sanitary rules that is simply amazing.

Bacillus.

That severe epidemic, that broke out in Hong Kong in May 1894, has been rendered memorable by the discovery of

the *coco-bacillus* by the eminent Japanese bacteriologist Kitasato.

The *bacillus* is a short rod with rounded ends and these ends take stains better than the central part so that it looks like two dark points joined together by a lighter central area. It is found in the glands, the blood and the viscera. This bacillus is not found in any other disease and obtained in pure culture it is capable of producing in inoculated animals the same effects as human beings. It gains entrance into the body through abrasions in the skin, through the respiratory tract and also through the digestive tract. Of the lower animals, rats, mice, guinea-pigs, rabbits and squirrels are susceptible to the disease. While dogs appear to be very refractory to inoculation. At one time there was a general impression that the disease is carried from house to house by mice which seem to infest almost every house. In fact people became panic-stricken as soon as they found that a few rats have died in the house. As an important factor in the epidemiology of this disease it may be stated that every epidemic starts from an unhealthy locality where the soil is generally saturated with human and other animal excreta and spreads taking the direction of the general slope of the ground.

Young persons between the ages of 15 to 35 seem to be more susceptible to the disease than others. Women also seem to contract the disease more frequently, as they live in the house more than men. Persons who are debilitated by disease or are in an otherwise impoverished condition of blood seem to be more subject to the disease.

Clinical Types.

Drs. Dyson and Calvert in their report on Plague in Bombay make four varieties :— (1) the Bubonic ; (2) the Septicemic ; (3) the Pneumonic ; (4) the Intestinal. Then again Dr. Gordon Tucker mentions of six varieties :— (1) the Bubonic ;

(2) the Septicimic ; (3) the Pneumonic ; (4) the Intestinal ; (5) the Cerebral ; (6) the Cellulo cutaneous.

For all practical purposes these clinical varieties seem to be quite sufficient. From personal experience extending over several hundred cases, I can say that it is very difficult to make an absolute classification of this disease, for the majority of cases seem to be of the mixed variety. With a high fever we find an enormously enlarged bubo and with it a looseness of the bowels which is very offensive indicating a materially deranged condition of the intestines. Then again we get cases when the brain seems to be affected from the beginning in spite of the enormously swollen bubo, here also you may find the bowels out of order and the lungs engorged, so that it is at times most difficult to classify according to varieties.

Of the peculiarities observed in plague cases a few words may be said with advantage. The general appearance of the patient is apathetic. He is in extreme agony, still his senses seem to be benumbed to such an extent that he is unable to realise it. When asked, he says he feels alright. The eyes have a glazed appearance and they look suffused. The heart is an organ that should be watched most carefully from the beginning to the end, for it is here that the mischief plays the most important part. Plague seems to have a most peculiar action on the heart or its intrinsic ganglia. It is generally manifested by an intermittent pulse which becomes of very low tension and which must be looked upon as a most grave symptom. Of the other organs the spleen and the liver seem not to be influenced much by the disease. Even if they are found to be enlarged a little they are not of significance. The urine reveals nothing abnormal as a rule. At times the quantity of urea and uric acid seem to be greatly diminished, A trace of albumen is also occasionally seen. The bowels may be constipated or there may be a diarrhea, the motions being at times involuntary, and very offensive in character.

The temperature range is very variable and interesting. The temperature may run as high as 106 or 107 for three or four days when there is a remission. But usually the temperature rises again but not so high as before. Then again in some cases there is a constant fluctuation of the temperature. Just now it is 105, an hour later it is 102, then again two hours afterwards it is 105 F. A constantly varying temperature is a very grave symptom.

With the fever the mouth is generally very dry and parched and there is great thirst. But at times the patient may be so completely unconscious that he is unable to ask for water.

Diagnosis.

Those who have had any experience of plague cases do not find it very difficult to diagnose a case, especially when there is an epidemic raging. At times a single look at the patient is enough. The high temperature, the irregularity of the pulse, the peculiar mental condition, and the dazed condition giving the eyes a suffused look are pathognomonic of the disease. Of course in the very early stage it is at times very difficult to differentiate it from a simple case of fever. At such times it behoves the physician to enquire into the history of the case and also if there is an epidemic raging at the place. According to the bacteriologists the presence of the *Coccobacillus* is the only positive diagnostic feature in the case.

The prognosis in this disease is very grave. The mortality is at times as high as 95 percent. But those cases that are placed under homeopathic treatment from the beginning and those cases that are generally removed from the place of infection to better and more healthy localities generally get well. Year before last I was able to cure many cases even when there were as many as twenty to thirty cases in one busty. Of these the majority of the cases that came under my treatment from the beginning got well. In the present year I

have had fewer cases but the prognosis has been decidedly better.

Sequelæ.

Now a few words need be said in regard to the sequelæ of plague. Of the cases that have recovered under my treatment two developed an obstinate ulceration of the cornea that took a long time to heal. In several cases I have observed a sinus remaining in the inguinal region long after the fever had left.

An extremely nervous condition is generally observed in these patients after recovery and in one or two instances I have observed an irritable condition of the heart remaining as a sequel to the disease.

Paralytic conditions are also said to be a common sequel to the disease but I have never seen a case.

Treatment.

A few words must be said about the prophylactic measures. As prevention is better than cure, it is our first duty to try to avoid an outbreak of such a dreadful malady. There can be but little doubt that much can be done by sanitary and hygienic rules to avoid the breaking out of a serious outburst of this disease. Personal cleanliness must first come into our consideration. In places where Plague is seen to be raging people are far from being clean. They wear clothes the very appearance of which would have the effect of a strong emetic to any body who is not used to such sights. Besides their bedding and other apparel used for bodily protection are far from being clean. The dwellings they inhabit are also far from being healthy. In most of these houses there is no free ingress and egress of air and light. If these things are rectified much can be done towards thwarting an epidemic. Next is the consideration of free drainage and water supply. Many of these places have no free drainage system.

Many measures have been introduced by which immunity could be acquired towards the disease, but most of them have proved to be absolutely futile when the actual epidemic breaks out. Haffkine's prophylactic serum has been very highly spoken of by many people and many have been inoculated free in the Bombay Presidency as also in Calcutta. Government authorities are of opinion that it has decided prophylactic virtues.

Year before last a European gentleman came under my treatment with all the symptoms of Plague, which he said was the result of inoculation by Haffkine's prophylactic. We, Homeopaths, have made extensive use of Rhustox 30, which seems to have a very beneficial effect particularly in people who elicit symptoms of an acute cold and are frightened of an attack of plague.

We certainly ought to do something in this direction because we know that a measure like this has a great effect on the mind and the mental conditions at times help materially in avoiding an attack. At a time when an epidemic is ripe, people are generally in a very excited state of mind and anything that can be done in allaying this excitement will have great effect in mitigating the ferocity of an epidemic. Isolation of infected patients and segregation of people who have come in contact with such patients are measures of paramount importance and are very good if properly carried out.

Therapeutics.

As regards the Homeopathic treatment of this disease, I have followed the thoroughly Hahnemannian method of prescribing. There are no specifics in Homeopathy for this disease. The totality of the symptoms is our sole guide in the selection of the remedy.

Rhustox and Mercurius are two remedies that I have used with much advantage in the initial stage of the disease. Rhustox is more useful where the fever is the predominating

feature, where there is great restlessness, but where the buboes are not very painful. Not only is this all. That Rhus has been efficacious in ridding the ravages of many a severe attack in the bud we have not a shadow of doubt. When I say this I do not make any conjecture but speak from an experience of many hundreds of cases of fever with glandular swellings, who hailed from places where the epidemic was causing the greatest havoc and where I had myself treated many cases of real and undoubted plague.

Looking now at the symptomatology of Rhus toxicodendron we find that it is useful in many skin affections, in diseases of the mucous membranes, in low typhoid conditions. It is also useful in septic conditions, particularly where the glands are swollen and inflamed. Hahnemann himself refers how Rhus along with Bryonia was able to cure many cases of a low form of typhus that prevailed in 1813. He says: "From the symptoms of these two integrative miasmatic diseases we can easily understand how both each in its place would prove the most suitable homeopathic remedies for the disastrous pestilence which desolated the countries that were most exposed to the war that raged from the winter of 1811 onwards." Mercurius is useful if the buboes are excessively painful and tends to suppurate. With it we generally have a sticky perspiration that is very exhausting but affords no relief to the patient. A moist skin with great heat is also good indication for Belladonna, but here the brain is principally affected and generally the head symptoms are pronounced. Often a single dose of the remedy will have wonderful effect in pacifying the brain. Hyoscyamus and Stramonium are remedies that should be thought of in case where Belladonna fails. I have had very good results particularly with the former. There was one case that I reported in the April number of the *Indian Homeopathic Review* (1904).

To be continued.

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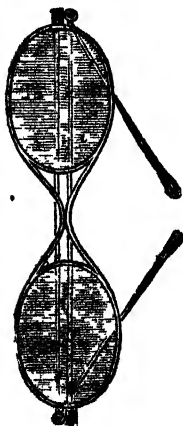
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এখানে সকল প্রকার হোমিওপ্যাথিক ও ইলেক্ট্রিক হোমিওপ্যাথিক ঔষধ, প্রোবিউলস্, পিলিউলস্, কাইল, কর্ক, পুস্তক, ড্রুগার, গার্ডিয়ান চিকিৎসার বাস, কলেরা-ব্যাগ প্রভৃতি প্রচুর পরিমাণে পাইবেন।

সরল গৃহ চিকিৎসা।

গৃহে গৃহে হোমিওপ্যাথিক প্রচার উদ্দেশ্যে এই পুস্তকখানি সরলভাবে, সুলভ মূল্যে প্রকাশ করা হইয়াছে, এই পুস্তকে নতুন ব্রতী চিকিৎসকদিগের তত্ত্ব আমরা প্রত্যেক পীড়ার নির্দিষ্ট ঔষধগুলির সচরাচর ব্যবহৃত ক্রম উদ্দেশ্য করিয়া দিয়াছি, গৃহস্থ ও শিক্ষিতা বাসীগণ পর্য্যাপ্ত ইহা দেখিয়া সহজে তাহাদেব নতুন, সন্ততিগণের চিকিৎসা করিতে পারিবেন। মূল্য—৮০ আনা মাত্র।

ওলাউঠা চিকিৎসা।

ওলাউঠা বা কলেরা অতি সাংঘাতিক পীড়া। হোমিওপ্যাথিক ঔষধের চিকিৎসায় ইহার একমাত্র উপায় তাহা বোধ হয় সাধারণকে আর বুঝাইতে হইবে না, তবে প্রথম হইতে সীতিমত ভাবে চিকিৎসার আবশ্যক। সেই জন্য প্রত্যেক গৃহস্থের একখানি কলেরা পুস্তক ও ৬ কিছু হোমিওপ্যাথিক ঔষধ রাখা কর্তব্য। রোগীকে শয্যাপার্থে বসিয়া বড় বড় বাশি বাশি পুস্তক হাতড়ান অপেক্ষা ইহা হইতে অতি সহজে, অতি শীঘ্র রোগের লক্ষণ দেখিয়া ঔষধ নির্বাচন করা শ্রেয়ঃ, ইহার ভাষা অতি সরল, মূল্য—১/০ আনা মাত্র।

সাধারণ মূল্য—মাদার টিং প্রিঙ্কড্রাম ১/০ ১ ড্রাম ১/০, ১ম হইতে ১২ ক্রম পর্য্যন্ত ১০, ১ ড্রাম ১/০, ৩০ ক্রম ১/০, ২ ড্রাম ১/০, এককালীন ১/০, ১/০ প্রকার ঔষধ, লইলে শতকরা ১০০ হিঃ কমিশন পাইবেন। পত্র লিখিলে সচিত্র ক্যাটালগ পাইবেন।

বটিকার পাল এক কোং।

এই হোমিওপ্যাথিক হল, ১২ নং বক্সিং লেন, — কলিকাতা।

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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.]

AUGUST 15, 1904.

[No. 8.

Beware.

The Homeopathic system of medicine is spreading in this country and there are signs of improvement every where. In places, where the mere name of Homeopathy was not known some years ago, now our physicians are well received.

But we notice with great concern that there are two things which come on slowly which will one day ruin our prospect. So we must be on our guard in time.

These things are—(1) the standard of education, especially the homeopathic training of our practitioners; and (2) the purity of medicinal supply. If these things are contaminated our cherished hope of progress will be at an end.

There are a goodly number of qualified and better trained physicians in Calcutta and its neighbourhood, but their numbers are very few. The supply of homeopathic physicians outside of Calcutta is made up from two sources. One from the recruitment of allopathic graduates of the Government Medical College and the other from the passed students of our Homeopathic Schools. There are, besides these, some *denovo* Homeo-

paths. They come of their own accord, after purchasing a book and a box of homeopathic medicines.

Of the Government College graduates those who accept Homeopathy as a profession, inspire greater confidence among our people. But many of them are not well up in the art and science of Homeopathy. Many of them lack confidence in the remedial virtue of our medicines, so they are at one time an allopath and in the next moment a homeopath. Of course there are honourable exceptions. We know from personal experience that these so-called homeopathic physicians have no knowledge whatever about the fundamental principles of Homeopathy, so they do whatever suits them best. An instance will convince our readers what we mean. A Homeopathic physician in attendance on a richman in Calcutta used to treat cases of fever in a peculiar way. He used to give some homeopathic medicine during fever and as soon as intermission came on he prescribed big doses of quinine to stop the further recurrence of the paroxysm. I was called to see that rich man's son at one time and medicine was given according to indications and the fever stopped. In my next visit my patient requested me to prescribe some quinine pills. I declined to do so and he was surprised, and asked me how am I to stop the recurrence. I gave him the assurance that if I am right in my prescription there will be no chance of a relapse. He had no more fever and the rich gentleman, the father of my patient, told me that this is the first time in his life that he finds a Homeopathic remedy efficacious. In this family a homeopathic physician has been retained for the last decade.

The like of this has been practised by our graduates of the Medical College. Everybody will be able to realize what amount of progress Homeopathy can be expected to make in the hands of such physicians. They have no knowledge of the teaching of the Organon.

Our next class of homeopaths are recruited from the graduates of the Homeopathic Schools. Public in general have not much faith in these practitioners. They are not to blame for this. They find out that our Homeopathic Schools are not well equipped with upto-date scientific teaching. There are many so-called Homeopathic Schools in Calcutta and one or two of them boast with the name of "College". This brings on a heap of ridicule on the school. We know one such College having only a few students and one or two teachers. What can be expected of such a College and who can put any reliance on a graduate of such an institution.

We know of a gentleman calling himself a graduate of one of this kind of College who never attended a single lecture there. This is horrible. This College is conducted by a gentleman who calls himself a puritan and advanced in rank.

But some of these graduates of our Homeopathic Schools know the exact sphere of Homeopathy and they are versed in the teachings of the Organon and practice better Homeopathy than the allopathic graduates, but then they have no position in the estimation of the public. The last class consists of those practitioners who practice Homeopathy without any school education. In former days some of the homeopaths of this type put a lustre to our profession. They generally practised as amateurs and by their perseverance, energy and enthusiasm they did a great deal of good to Homeopathy in this country. Now their successors get demoralized and are doing immense harm to the cause of our cherished art and science.

So we must do something to prevent the utter ruin of this noble science of Homeopathy.

Change of Type in Cholera.

(Continued from page 131.)

Colchicum is a medicine now-a-days very frequently used. The discharge contains flakes of mucus, such as would be produced by inflammation. We have large and watery evacuations, accompanied with severe griping and tinged with bile; stool passed involuntarily; frequent watery stools without any sensation; stools profuse liquid, involuntary before death, of black colour (see Mancinella) and of an extremely offensive odour; yellow, watery stools; painless stools. *Stools containing large quantity of small white shreddy portions.*

Besides the stools, one meets with the following accompanying symptoms. Suppressions of urine; great distension of the abdomen; thirst; extreme prostration. The cramps are slight, chiefly affecting the large muscles, as those of calves, thighs &c,

Dr. T. F. Allen makes note of this in cholera.

Muscarine is the alkaloid of *Agaricus* and was first advocated by Dr. Salzer in his book on Cholera. I was the first to use it in practice and my first case was published in my book on Cholera. Cases of *Muscarine* are met with occasionally and this medicine has proved very successful.

The stools are red, very nearly like blood, there is a large amount of mucus with much griping; the stools are copious each time; there is suppression of urine; colic and tenderness all over the abdomen; the pulse weak; but the chief characteristic is the great *difficulty of breathing*, which comes on from the very beginning of the attack; in other cases of cholera, difficulty of breathing comes on at the end of cholera when the blood becomes thickened.

In the provings of *Agaricus Musc*, we find only "yellow watery or dark coloured stool."

Below I quote from my book on cholera, the distinction between *Muscarine* and *Veratrum Album*; -

*Verat. Alb.**Muscarine.*

- | | |
|--|---|
| (1) Difficulty of breathing comes on sometimes after the onset of cholera. | (1) Difficulty of breathing from the onset of cholera. |
| (2) Colic pain in abdomen not marked. | (2) Very marked abdominal colic. |
| (3) Stool, whitish or slightly green-tinged water, a little deposit below. | (3) Stool, bloody water, with large quantities of white deposits below. |
| (4) Great thirst from the very beginning. | (4) There may or may not be thirst. |
| (5) First vomiting and then purging. | (5) First vomiting and then purging. |

Muscarine is a prompt irritant to the intestines and a depressant of the heart.

Agaricus Phalloides.

This medicine has several symptoms of cholera, which are reproduced below; the provings are however meagre.

Face cyanotic; countenance hippocratic. Tongue cold, breath cold; speech indistinct, violent thirst; nausea, vomiting and diarrhea, bloody vomiting. Pains in stomach and hypogastrium followed by anxiety and vomiting. Incessant cramps of the stomach, violent pains in epigastrium, rapidly spreading over the whole abdomen. Tense abdomen. Whitish stools, as in Asiatic Cholera; bilious stools; bloody stools (see *Muscarine*).

Suppression of urine; voice hoarse; respiration short. Pulse slow, small, irregular and intermittent; hardly perceptible. Cold extremities; livid extremities; fingers and lips livid; cramps of the legs; cramps of the calves and feet. Convulsions of the extremities. Debility; extreme

prostration. Development of true cholera ; sometimes a kind of cholera sets in, which varies the patient ; but in general when cured, then convalescence is prolonged. Livid skin and cold sweat.

The effects of this drug resemble most clearly a violent attack of cholera.

This medicine I tried only once in a case of cholera but to no effect.

It has been said before that *Muscarine* has bloody stool ; this is a clinical fact but there is no proving of it. The presence of the same in *Agaricus Phalloides* shows that *bloody stool* is a real characteristic and not a coincidence.

Below, the case of cholera, in which *Muscarine* was first used by me, is quoted :—

9-12-92. 9 A.M. Hindu, male aet 14. Suffering from malarious fever for sometime. Has had no fever since a few days after the use of *Nat mur*. To-day his moving has been since morning 4 stools. At 9 A.M. had the last stool, after which he began to get chill. I was present at the time and it seemed to me that he was getting fever, but the pulse showed no febrile symptoms.

After I left, the patient had one stool more and was seen by me at 12 noon.

12. A. M. 9-12-92. Present state:—Pulse weak, thready and intermittent, dyspnea with restlessness ; eye-balls sunken ; absence of thirst, tongue moist and cold all over. The last stool was kept for my seeing, it was about 24 ounces in quantity. The previous 4 stools were of simple diarrhea. The present one is bloody and watery, with whitish flaky deposits below. No urine since the first stool.

After the last stool, the patient's father had given him spirit of camphor, one dose of 10 minims. After this, upto my arrival, there has been no other stool.

Verat Alb 6 every $\frac{1}{2}$ hour.

2 p.m. :—No stool ; thirst ; restless and dyspnea continued as before.

Muscarine 6 every $\frac{1}{2}$ hour.

5 p.m. After the first dose of *Muscarine* the patients' restlessness and dyspnea disappeared at once ; the patient is now sleeping ; hands and feet cold ; but the pulse is stronger than before. The patient's father has been giving him medicine every 15 minutes.

Muscarine 6 every $\frac{1}{2}$ hour, to be stopped when the patient is asleep.

9 p.m. Vomited twice, matter vomited consisting acid smelling water and mucus ; pulse still more improved ; hand and feet warm ; patient is not asleep. Medicine to be given only when awake.

12-12-92. 9 a.m. Slept off and on upto 3 a.m., after which he had two semi-liquid stools and passed a copious quantity of urine : After this till 9 a.m. had a sound sleep. Complete change in the appearance.

Medicine thrice a day. Barley and water for food.

Secale Carnutum—Cases of it are seen now and then. The stools are watery, exhaustive and profuse ; the first one or two stools are offensive, but the rest are not ; very soon there are cramps of the fingers and toes ; these cramps affect the extensor muscles, but not the flexors, as in *Cuprum* or both the flexors and extensors may be partially affected (in *Cuprum* the extensors are never affected). The extremities are pale, cold and wrinkled ; there is inability to keep the body covered, notwithstanding the body may be icy cold (*Arsenic*, as found in this country).

"Asiatic Cholera, particularly with the icy coldness and intolerance of being covered (of first importance)."

T. F. Allen.

Arsenic is avoided because it is never used in the first stage, looking at the stools alone.

Stools like dirty ditch water, was once seen in a epidemic of cholera in Bombay several years ago. We selected *Mancinella* then, but had never an opportunity to see such a type : "offensive and black stools" are also found in *Colchicum*. As this is a good cholera medicine, we would prefer this to *Mancinella*.

Elaterium and *Croton Tiglium* are occasionally useful. *Elaterium* has olive-green stools (containing a little bile) and *Croton* has yellow watery stools. *Gratida* was useful in our hands in one case, but this last has yellow purging and yellow vomiting.

Jatropa and *Euphorbia* have been suggested as medicine in diarrheic cholera.

Dr. Salzer gives the following distinction between them :—

Jatropa.

Euphorbium.

- | | |
|---|---|
| (1) Nausea and vomiting. | (1) Sudden vomiting, without |
| (2) Vomiting simultaneous with any premonitory signs. | |
| or followed by purging. | (2) Vomiting simultaneous with |
| (3) Colic (in the transverse purging. | |
| colon), rumbling in the abdomen, tympanitis. | (3) Pain entirely absent, no rumbling, no tympanitis. |
| (4) Cramps, especially in the calves. | (4) No cramps. |
| | (5) No palpitation. |
| (5) Palpitation of the heart. | |

"*Jatropa* and *Euphorbia*, may be excellent remedies in choleraic diarrhea ; in diarrheic cholera, they could hardly be expected to be of more than symptomatic significance in the treatment of the disease." *Dr. Salzer.*

• Bipin Behari Maitra, M.B.

Plague.

(Continued from Page 176.)

Dr. Sircar recommends Ignatia as at once a prophylactic and curative medicine for this disease on the authority of Dr. John Martin Honigberger, who says he learned Homeopathy at its very source, *i.e.*, from the master Samuel Hahnemann himself, and who found that the people of Constantinople wore a string to which was attached a bean called *Strychnos Fapa St Ignatia* as a preventive against plague. This doctor, when visiting India during the great Pali Epidemic, was himself attacked with plague and was cured by Ignatia in small doses. He mentions nothing about the potency of this drug, neither did he mention anything about the symptoms of the cases that he cured with it, nor did he think it necessary to mention any other remedy. Dr. Sircar says perhaps he did not think it necessary to do so having found in Ignatia almost a specific. While it may be true that a certain remedy can become the *genus epidemicus* in a certain disease for a certain time, it can never be the specific for that disease, or else the law *Similia Similibus Curantur* would become unscientific, for do we not know that each disease has different varieties and each variety again presents different groups at different times so that it is absolutely unscientific to declare a certain drug as the panacea for a whole disease.

Our friend, Dr. D. N. Ray, speaks well of Loimine or Buboninum, having had good results with it. He used it on the authority of Dr. Theuille, but we find there is no proving of this drug. Dr. Ray also recommends Pyrogen, Anthracinum, Rhustox, Ailanthus, Glandulosa, Muriatic Acid, Mercurius Cyanotus, Phytolacca, and Apium Virus as useful. I myself have had very good experience with Ant. Tart, Calc Ars,

and Lachesis in very serious cases. The two latter remedies seem to have wonderful control over the heart muscle. Year before last a youngman, who was almost dying, was saved by the timely administration of Calc. Ars. His pulse had become intermittent and was very frequent. Breathing was superficial and hurried, and a sudden failure of the heart's action seemed imminent. Lachesis is useful where the breathing is oppressed and the patient is very much distressed. Some years ago I saw various experiments about the effect of the serpent poisons on lower animals, and I remember very well the effect the poison had on monkeys. First they would begin to be drowsy, their heads drop and very soon they wake up with a jerk, become very restless, expressing great suffering and relapse into the semi-comatose condition, and then expire in a short time. Some plague patients have a great resemblance to this and these patients are greatly relieved by Lachesis. I had one case under my treatment about a month ago, whose sufferings were greatly mitigated by Lachesis. He was a young boy and was getting drowsy and restless alternately.

A soporose condition with rattling of mucus in the chest and impeded respiration are good indications for Ant. Tart. In these cases Opium ought to be a very good remedy, but I have never had good results with it.

Dr. P. C. Majumdar speaks well of such remedies as Bell., Rhustox., Pyrogen, Dulcamara, Ferr. Phos., Kali Mur and Phosphorus at the commencement. If the brain is the principal seat of the mischief he thinks well of such remedies as Bell., Stramonium, Opium, Nux Moschata, Ailanthus and the like. If however the heart seems to be affected Acon., Calc. Ars., Crotalus, Naja, Kali Phos., Hydrocyan Acid, Digitalis, Morphinum and Muscarine should be thought of.

Echinacea as recommended by my friend Dr. G. L. Gupta may be tried. It is useful in cases that elicit symptoms of profound blood poisoning with an offensive diarrhea, where the

bubo tends to suppurate and the brain is also in a high condition of excitement. Spr. Nitr. Dil. is a remedy that has many symptoms of plague. In Hering's little book on *Typhoid Fever*, I found its principal indications; I used it in some cases last year. In the later stages when the prostration becomes extreme, but still there remains the agonising restlessness, we might think of Arsenic with advantage. Dr. Hughes thinks Arsenic and Lachesis would be the two remedies on which he would rely. Mercy and Hunt mention Veratrum, China, Ipecac and Carbo Veg. as likely remedies, besides some of those that I have already mentioned. Dr. Hering wrote in the *North American Journal of Homeopathy*, 'Lorbachar proposes as the main remedies for plague, Lachesis, Arsenicum, Carbo Veg., China, Sulph., and Phosphorus, Secale and Anthrakokali. We may mention here the proving of Badiaga, which might be considered a remedy against plague. What Lachesis will do is uncertain. Still more uncertain is Arsenic. Chinin. Ars. not being proved we may leave aside altogether. Kali Phos proposed by Raue, we permit ourselves to mention as very promising. Stramonium has more similarity with Plague symptoms than Belladonna and Silica more than Hepar Sulphur. Loimine, a preparation of the pus of the Plague brought here by Dr. Theuille, has cured undoubted cases of plague.

Lilienthal mentions the following remedies as likely medicines for plague in its various stages and conditions :—

Oriental :—Ars., Bapt., Bell., Carb. V., China., Crotal., Lach., Nitr. Ac., Rhus., Sec., Sil., Sulph., Sulph. Ac., Veratr.

For *Prostration and Carbuncles* : Ars., Carb. V., China., Lach., Merc., Sec.; *Nervous symptoms* : Bell., Cann. Ind., Cham., Crotal.; Hyosc., Veratr.; *Deliria subsultus tendinum* : Camphor, Hyosc., Lach., Laur., Mosch.; *Bubo pestilentialis* : Ars., Carbo. V., China., Merc.; *Gastric complications* : Ipec.,

Nux. V., Tart. Met. ; *Choleraic diarrhea* : Ars., Sec., Veratr. ; *Hemorrhages* : Crotal., Kreos., Phos., Sec., Sulph. Ac.

The use that has been made of some of our remedies particularly the serpent venoms, by Dr. Akhoy Kumar Datta is worthy of note. I quote below the extract that has been appended to the last edition of Dr. Sircar's pamphlet on Plague. He speaks thus :—

I have used Cobra in the 6th and in the 30th dilutions in such a stage of the patient, when coma is not profound and difficulty in deglutition not so great as to prevent entrance of any liquid into the throat, with admirable effect. In fact the profounder is the affection of the higher nervous centres with impending asphyxia and threatened dissolution of the entire organism, the greater is the indication for Cobra pronounced. With the above picture of the attack, if there be petechial marks and the eyes are red and suffused, and general or diffused swelling of any part of the body accompanied by glandular hardness and pains and an extreme soreness of the body, Crotalus is much more indicated than any other medicine. I have used it both in the 6th and 3rd dilutions with wonderful results. If again with the above conditions swelling of the face and neck with red painful enlarged glands of the submaxillary parotid and tonsillar regions exist with extreme difficulty of deglutition, fetid breath and a putrid condition of the mouth, Lachesis is better indicated than the two above. Besides, when the whole condition described above, continues for a few days in a more or less subdued form, when blisters, erysipelas, boils, carbuncles and local gangrene gain time to develop (these being much rare in cases seen in Calcutta), then of course the indications for Lachesis are more fully pronounced, (Ars. alb.). In the hemorrhagic complications with or without jaundice both Crotalus and Lachesis have given me excellent results.

He speaks very highly of Pyrogen thus :—But nothing seems to me to be so highly efficacious in combating the fever

of plague, which is undoubtedly of a septic nature as Pyrogenum.

I generally used the drug in the 30th potency in plague for fear of aggravation and am always satisfied with the results obtained. His observations on some of the other remedies as Camphor, Carbolic Acid, Ignatia, Badiaga and Kali Chloricum are also valuable.

Peeps into Cures by Homeopathy and by a single Medicine.

Cholera Infantum; Ipecac 30th.—A niece of Babu Kishori Mohon Adhikari, Court Sub-Inspector, Jangipur, Deputy Magistrate's Court, aged one year. During the prevalence of Cholera in Raghunathganj, the baby vomited on a sudden on the 3rd June 1904; the vomit was of curdled milk. After vomiting severaltimes, she passed whitish frothy stools. With this, urine was suppressed. She was first treated by the Ayurvedic method but the three *Batikas* (pills) administered were thrown out each time with the vomit and the patient grew drowsy and worse. Allopathic practitioners were consulted on the night of the 4th June 1904. As a sort of trial, the baby was placed under Homeopathic treatment on that very night; the irritated state of the stomach with its vomit as soon as anything was taken deterred the allopath from administering his medicines. The temperature of the body was 99 degrees. There was thirst, but the moment water entered the stomach it was ejected. The rising temperature, the instantaneous vomit, at first of curdled milk, then of water when the water was taken, the weak pulse, the excessive thirst, the suppression of urine and the drowsiness led me to think it to be a case of *Cholera Infantum*.

I took up the case with some diffidence and gave Ipecac 30x, a dose every two hours for the night of the 4th June 1904. At about 4 P.M. at night, the colour of stool changed to yellow and urine made its appearance.

On the 5th June 1904, Ipecac 30x was administered, a dose every three hours; milk was forbidden, in fact all food was stopped. There was vomiting up to the middle of that day.

On the 6th June, the temperature became normal, the stool became of thick consistence, yellow colour, and only four times; there was neither vomiting nor drowsiness. Ipecac 30x every fourth hour. Barley water was given. There was slight fever.

Ipecac 30x was repeated up to the 9th June with great improvement, when the stool changed into a green jelly-like mass. I did not leave Ipecac, but continued administering it for a few days more. The girl soon rallied round and is now well.

Colic Pain; Acon 1x and 200x. One Makunda Das, a Bairagi mendicant, aged 40 of Ghosheshala District, Murshidabad, came up to me for treatment on the 23rd February 1904. His was a case of colic for more than a year's standing. A poor mendicant, he used Charitable Dispensary medicines and some nostrums but to no effect. He complained of aching, stinging, tearing and burning pain in abdomen. The pain commenced three hours after meal, beginning from the region of the umbilicus and spreading in all directions. The first sensation was of an aching, stinging, tearing character with the development of the burning character a little after. The burning sensation was noticed most prominently from the upper side of the navel to the region of the right epigastrium and right hypochondrium and the intensity of the pain was most felt somewhat near the pyloric orifice. This burning sensation, he compares to the flame of a strong torch placed longitudinally from the navel to the height of the right sternum and sending

its flame on to the right side upto the right side of heart and lungs.

After the height of the burning sensation had been reached, the griping round about the navel made its appearance. Both these sensations descended into the hypogastrium and lost force there.

The colic pain was increased by sitting as well as by walking. Relief could only be had by standing with the chest a little backwards. Discharge of flatus or filling up the stomach with food diminished the severity of the symptoms, but an empty stomach only aggravated them. The pain increased most in the night and rendered nights sleepless.

There was excessive accumulation of flatus in abdomen and the right side of the abdomen appeared higher than the left or the splenic side. With accumulation of flatus and distension of abdomen there was rumbling in bowels and constipation.

He also complained of slight headache every day and of fever daily when the colic pain was at its height. He had little sleep at night.

I gave Acon 1x twice daily with intervals of two days after four days till the 21st of March 1904. The fever completely disappeared, and all other symptoms greatly diminished. On the 1st April, he reported to me the entire absence of flatulence, of constipation and of pain on right side of the chest. The colic pain rising like a flame from the navel up to right chest did not entirely disappear. This time I gave Acon 200x twice daily up to the 24th April with a respite of two days, after every four days.

On the 24th April, he reported an all-round improvement, save that there was slight pains in the right hypochondrium. He was positive about the griping and the burning, being *honest*. Then I prescribed Placebo powders for a week.

The patient still murmured though he gave an excellent

certificate to the placebo powder as being very efficacious. What he complained then, was a slight aching sensation on the right side of the umbilicus, beginning at 5 p.m., and lasting daily up to 7 p. m. I gave him Aconite 1x for seven days and after that he reported to me of his recovery. Since that time he has not turned up again.

Cholera Asiatica ; *Cup. Arsenicum*. Panchanan Chatterji's (mohurer of Babu Indra Chandra Mukherjee, B. L.) daughter, aged 17, Raghunathganj. The girl's disease began with vomiting. She vomited six times, then had watery stools twice. The vomiting commenced on the 9th May 1904, the watery stool began at 11 p. m. at night and the spasm of the hands and the feet at 12 p. m. Her eyes were red and dull, her pulse was weak, her urine completely suppressed. There was thirst and restlessness with burning in abdomen. Her father came to me at 2 a. m. at night.

I gave her Cuprum Arsenicum 30x to be taken every hour. But strange to say that in the morning, she rallied, the stool, the vomit and the spasm had all disappeared ; the slight fever made its appearance denoting the commencement of re-action. The eyes remained slightly red, she was a little restless with slight burning abdomen and thirst. The pulse showed decided signs of improvement.

Cuprum Arsenicum was again repeated every two hours and in the afternoon of the 10th May 04, after administration of 4 doses of the medicine she fairly recovered.

All medicine was stopped for a day and she did not require any further treatment.

Kangal Chandra Gupta.

Some Traumatic Remedies.*

The first and perhaps the most important remedy of this class is the mountain Arnica or Leopard's Bane as it is commonly termed.

Its principal symptom or the leading keynote is a sore-bruised feeling, which is pathognomonic of hurt. The whole body feels as if thoroughly beaten and the pain at times becomes so severe that it is difficult for the patient to move. Arnica acts on all kinds of injuries but its principal sphere of action is upon the soft tissues and so it is useful in all kinds of injuries that accompany fractures, dislocations, bruises, ecchymosis &c. I make it a rule to give a few doses of Arnica to the mother, immediately after the birth of the child. And indeed this has been the common practice among the homeopaths from a long time. I believe VonGrauvogl was one of the first to recommend it in all kinds of operations, but particularly in obstetrical cases. The sore-bruised feeling that I have spoken to you of at the beginning is at times so severe that the patient is unable to lie in bed quietly. She has to move from place to place, the bed feels *so hard*. Although we have other remedies for nervous trauma, still its action on injuries is so marked that it is a most useful remedy in concussion of the brain, in cerebro-spinal meningitis resulting from mechanical injuries. In conclusion, I will mention the use of the remedy in gangrene, resulting from trauma and chronic diseases, that find their cause in some severe fall or injury that occurred long ago.

Our next remedy in this group is Rhustoxicodendron and I am sure many of you have heard me lecture on this drug last year. It is one of our sheet anchors in sprains particularly

* This is a lecture delivered by J. N. Majumdar, M. D., to the Students of the Calcutta School of Homeopathy.

of muscle tendons, such as result from lifting heavy weights, jumping from a height &c. It is useful also in paralytic conditions, that have been caused by violent muscular exertions. We might very well go a step further and mention its usefulness in river bathing and swimming. Fevers and chills that are brought on in this way are promptly relieved by the timely administration of Rhus. In this connection, I might as well mention that it is equally useful in exposure to cold, as it is in muscular straining, hence its value in summer bathing &c. Rhus unlike Bryonia affects the fibrous tissue and principally the right side.

In this connection, I might quote to you with advantage a few lines from Hughes, who says:—"The action of Rhus on white fibrous tissues has led to its being used in the treatment of sprains." Hahnemann says:—"I have recognized in these latter years that Rhus is the best specific against the consequences of muscular strains and contusions." I must say that I do not like the use of the word specific even though it is made by the master himself.

Rhus has been found to be of inestimable value in rheumatism, where continued strain has been the cause of the disease.

The next remedy that I will dwell upon in this connection is Calendula or the extract of the common Marigold. The use of this drug for cuts and injuries has been known to this country from time immemorial. The application of the juice extracted from the leaves to cut is a common practice among the labouring class in this country (গেঁদা পাতার রস). Its special sphere of action seems to be in ragged wound with or without loss of substance, accompanied with soreness and pain. It was used on a large scale by our American colleagues in the treatment of injuries arising in the course of the then Civil War, and it obtained their warmest commendations. It is a remarkable healing agent and applied topically as a lotion or in the

shape of an oil it heals the most obstinate wounds and sores. We have made extensive use of the remedy and have been able to cure gangrene, carbuncles, scrofulous sores &c. with it. Dr. Ludlam of Chicago praises it in lacerations about the pelvic organs and in the perineum. It promotes healthy granulations.

Hypericum or St. John's Wart is the great remedy for injury to the nerves. It has truly been termed the Arnica of the nerves. Intense pain is one of the guiding symptoms to its use. It has sometimes been used with advantage in tetanus and is said to have prevented trismus. The use that Dr. Franklin made of this remedy during the American War and as recorded in his *Science and Art of Surgery* is worthy of note. "Injuries of parts rich in nerves, particularly the fingers and toes and the matrix of the nails," open painful wounds with general prostration from loss of blood and great nervous depression and lacerated wounds.

Dr. Madden of England also made a proving of this drug, taking at times as much as 260 drops of the mother tincture. But in his case it had not produced many symptoms in this sphere save a few neuralgic shoots in the eyeballs and the right ulnar nerve.

The next remedy in this group is Symphytum. It has a special affinity for the bones. It helps the formation of callus in fractured bones and allays the irritability of the bones' ends which often prevents the knitting of the bones. In this connection it is worth while to remember Natrum Carbonicum which is very beneficial in easy dislocation and spraining of the ankle (Ledum). For old sprains, bruised pains in bones wrists, and cartilages Ruta is very good.

Another remedy that is very helpful in punctured wounds is Ledum. It is also very useful in insect bites, musquito bites, in bee stings &c. Dunham evidently does not put much faith in this peculiar use of Ledum. He says:—Teste, a more brilliant

than trust-worthy writer, says that *Ledum* is a specific cure for wounds with pointed instruments and for the evil effects of the stings of insects, from mosquitoes upto wasps. He applied locally a solution of the 15th dilution. Dewey justly remarks that *Ledum* supplies the gap left by *Arnica*, *Calendula*, *Staphisagria* and *Hypericum*. Thus *Arnica* for contused wounds, *Hypericum* and *Calendula* for lacerated wounds and *Staphisagria* for incised wounds while *Ledum* is most useful for the punctured variety as from nails, awls &c.

Staphisagria suits clean cut wounds and symptoms traceable to surgical operations, especially about the abdomen particularly when colic is a troublesome condition following.

Conium is useful in injuries and bruises of the glands particularly the mammary glands.

Aranea Diadema is a very good remedy for the hemorrhage after gunshot wounds.

Besides these we have such remedies as *Hamamelis*, *Erigeron*, *Ipecac*, *Cinchona*, *Crocus*, *Sulphuric Acid*, *Lachesis*, &c are good remedies for traumatic hemorrhages.

Clinical Notes.

By P. C. Majumdar, M. D.

Case 1. A gentleman, aet 62, thin and sickly appearance, had diarrhea from a long time, but the present attack dated as far back as the summer of last year.

He had been under Allopathy and Kabiraji treatment and was better and worse off and on. These several attacks made him prostrated.

He came under my care on the 10th April 1903, with a serious attack of dysenteric diarrhea. Stools about ten to fifteen times in the twenty-four hours. Aggravation generally in the afternoon and evening from over-eating and taking indigestible articles of diet, and from mental exertion.

Amelioration from heat and spare diet, and also from rest. Stools consisted of slimy, bloody masses with their yellow fluid. There were much griping tenesmus present.

Appetite good. Much wind in stomach and great deal of rumbling.

Aloes 200 one dose, followed by Placebo powders twice a day.

Much better in two days, stools much less in times and slime and mucus almost disappeared. But thin stools still remained. Another dose of Aloes 200 and Placebos.

No improvement in four days, griping and tenesmus present.

Colocynth 200 one dose and Placebos.

No good, stools increased in times, more at night, from 8 to 12, griping and strainings disappeared again.

No medicine for three days. Reported the same. I saw the stools thin, yellow containing some mucus.

Pulsat. 30 morning and evening. This had the desired effect. He was completely recovered in the course of a fortnight. No other medicines required.

Case 2. On the 15th February 1904. I was consulted by a young physician to see a serious case of Pneumonia, the patient is an elderly gentleman about 54 years of age, pale and emaciated.

He was treated by that physician for the last one week without much benefit. He gave him Belladonna, Phosphorus, Bryonia and some other drug to no purpose.

I went and saw him in an extremely feeble condition, pulse thready, almost imperceptible, cold sweat on the forehead and other parts of the body.

Difficulty of breathing, cough with rattling in the chest, there was considerable exudation in chest, but not much sputa coming with efforts of coughing. His appetite was gone, occasional retching and vomiting, tongue thickly coated

with dirty white fur. Alternate restlessness and apathy. Turning on either side caused a good deal of difficulty in breathing.

Drowsiness and complete torpor.

On examining the chest, I found moist rales throughout the left side of the chest with some crepitation on the right base.

Percussion sound dull in some and resonant in others; from all other appearances he had been suffering from very low form of Pneumonia. I gave him Antim. Tart 30, one dose every six hours. I left instruction to stop the medicine as soon as improvement set in.

Strange to say and all glory to Hahnemann, the patient had a good sleep after two doses of the medicine and on waking found himself almost alright. No medicine for the whole night and the next morning fever left him no stertorous breathing, sputa came out easily and to all intents and purposes, he was convalescent.

Some Placebos were given and he made a perfect recovery in a week's time.

Plenty of milk was given at the early stage and as he was getting well, more nourishment was ordered.

A Case of Appendicitis Cured.

The following letter is received from Mr. A. F. McMahon, 10, Convent Road, Entally, Calcutta.

Permit me to offer yourself and your son my sincere and heartfelt gratitude and thanks for your skilful treatment of my son aged 34, who had had an attack of Appendicitis and who has been thoroughly cured without having had recourse to any surgical operation which he inevitably would have had to undergo had he been placed under the treatment of one belonging to the old school.

The principal medicine used by you were *Lycopodium* and *Lachesis*, both of the 200th dilution finishing off with Sulphur 30th. He is now free from all pain and the swelling has entirely disappeared.

As this is a case which should be widely known, I would be much obliged in the cause of humanity if it were reported in the *Homeopathic Review*.

Editorial Notes.

Rain is heavy now, so we expect an increasing number of malarious fever cases this year. The more rain the more are the ravages of malaria. If the people accustom themselves to the surrounding circumstances and be a little more careful from the beginning they can protect themselves from the bad influence of malaria.

Less medicines and more attention to hygienic measures is all that we can place before them. Weeds and plants of various kinds grow abundantly in every part, so keep the land clean of them; try to remove all superfluous water from inundating your place of abode or making the ground moist. No quinine should be taken in any case as a prevention.

We are told by *The Medical Talk* of America that the mosquito, *ad* is taking hold there. Some doctors there believe that the prevalence of yellow fever is due to mosquitoes. The same theorizing is busy here in India that malaria fever is due to the presence of mosquitoes. We had repeatedly shown that places peculiarly free from malaria in this country are those places where mosquitoes are in abundance. But one good comes out of this theory. They recommend measures for the

destruction of these creatures which are very good for preservation of health.

We learn with pleasure that the British Homeopathic Association is doing immense good to the cause of Homeopathy in England. A reception was recently held in connection with, and to inaugurate the summer post-graduate course at the London Homeopathic Hospital.

It was on 6th June at 8.30 p.m., the Board Room of the Hospital was filled with ladies and gentlemen. The chair was taken by that renowned physician Dr. Dyce Brown. Mr W. Hibbert, an expert in electricity, gave a lecture on Electricity, the Rontgen Rays, and Radium.

Bathing—It is a very good thing for health. It cleanses the skin and keeps the outlets for effete material from the body open. In this country it also has the power of keeping body and head cool, thus minimizing the injurious influence of heat.

Cold bathing is good for the healthy and warm bath for the invalids. Complete bath in rivers, lakes and tanks is often enjoyable. Sea bath is beneficial for many diseased conditions but it is not so accessible to many parts of this country.

We are sincerely glad to hear that our venerable Dr. Salzer has improved in health at Kurseong, where he went about four months ago. We wish him complete restoration to health.

Dr. J. N. Majumdar has completed his book on Homeopathic Practice of Medicine in Bengali. It is written on the same lines as Dr. Dewey's excellent work on practice. Many of the diseases in that book have been literally translated. Much additions and new materials have been introduced from author's experience in this country. It will be a useful book for our practitioners who lack the knowledge of English language.

A good lithographic picture of our late lamented Dr. Mohendra Lal Sircar appeared in his paper, *The Calcutta Journal of Medicine* for February 1904. It is a true likeness of the deceased.

Our good friend, Dr. Nripendra Nath Sett had an excellent article on *Sanitariums* in this country in the last number of this Journal. Among the places in the Sonthal Perganahs, he gave great credit to Jamtara and Simultala but condemned Madhupur as the worst. But we must say, there is very little difference in the topography and climatology of all the places in this line from Jamtara to Jhajha or Nowady. Seaside places are not so good for the Bengalis as the dried and hotter places in the N. W. Provinces.

Plague cases are fortunately few and far between in almost all places in India at the present moment. Everybody expects its dismal visitation in early spring or commencing summer. We hope the doctors would devote more care and attention for combating this dreadful enemy. Homeopaths should endeavour their best and individualize each case and prescribe according to strict Hahnemannian principle. More good will come of it than by guessing and favourite prescribing.

Albert Leffingwell, M.D., of American Humane Association says, - "I don't believe that the average length of human life would be diminished by an hour if all the drugs of Christendom were dumped into the sea barring perhaps a half a dozen."

Notes on Materia Medica.

(Continued from page 163).

Phosphorous.

Preparation :—The so-called mother tincture of *Phosphorous* equals the third decimal dilution, making it either with

absolute alcohol, or with equal parts of this and ether. Subsequent potencies may be prepared with rectified spirit.

Its value :—For old school Therapeutics it is of no advantage to learn that *Phosphorous* congests the lungs, necrosses the maxillæ, softens the nervous centres, liquifies the blood and causes fatty degeneration throughout the body. But to us such knowledge is fruitful of practical results and has already raised the drug into the first rank of our medicine.

Its properties :—It is one of those which enter into the normal composition of the body and exists mainly in the nervous centres in the form of a peculiar compound with fatty matter which has been named 'Protagen,' just as iron is united with hemation in the blood. It actually forms more than 1 P. C. of the human brain, the amount gradually increasing from infancy to adult age and then again decreasing in old age. Upto a certain point it may be special stimulant to the tissues it goes to constitute and the stimulation being in some sort that of a food, it need not be followed by reactive depression.

Doubtlessly it has such an action on the nervous system—as iron has on the blood and (probably) lime on the bones. It is this action of *Phosphorous* which given in full and frequent doses, in typhoid depression and often rallied a patient from an apparently hopeless condition—it is rather stimulant than a medicine.

Phosphorous causes and cures in minute doses its own form of *neuralgia*. It is a neoretic as *iron* an hematice, *if too long continued or taken in excess it acts as a poison to the very tissues which it stimulates and feeds. Iron can in this way impoverish the blood, causing anemia and Phosphorous still more surely impares the vitality of the nervous centres and gives rise to paralysis.* There are cases of acute poisoning by it, which seem to exhibit pure paralytic phenomena. Dr. Hempel reports a case in which there was numbness of the extremities with for-

mication—the fingers having so little sensibility that they could not pick up a pin and in another there was amaurosis with widely dilated pupils and deafness.

Dr. Gallavardin asserts that it acts specially on the *nerves of voluntary motion* and on the muscles themselves, impeding, diminishing and at last entirely destroying the power of movement. It also acts specially on the *nerves of sensation*, destroying sensibility from the periphery to the brain, the sensorium being in small degrees disturbed.

It is truly homeopathic to paralytic condition, when dependent on lowered vitality or even softening of the centres and should be a valuable remedy therein. Dr. Surge and Mr. Thompson cite cases to illustrate this—these are nearly all of a functional nature, from *Amenorrhœa*, *seminal losses*, exhaustion from acute disease and such like causes.

In softening of the brain it acquires much reputation and Jhar praises it also in corresponding cerebral conditions of less advanced degree as *nervous vertigo* and *hydrocephaloid*. Dr. Hughes narrates a case suggesting the fibrillary contractions of *wasting palsy*, the “progressive muscular” atrophy of *Duchenne*. With *Phosphorous* we should not expect *wasting of the muscles* but simply their *fatty degeneration*.

In old school system it is held as a tonic but we have shown that it weakens in health where it strengthens in disease.

Its actions :—(1) The male sexual organs share in the general excitement caused by moderate doses of *Phosphorous* but their excitement is temporary and is followed by a long-continued depression, showing itself in *absence of desire*, *imperfect erections*, with too rapid *ejaculatio seminis*, and frequent involuntary emissions.

Thus it is a thorough homeopathic remedy for the *irritable weakness of the male sexual organs caused by excesses in venery and masturbation*. In impotency, this may be a stimulant in full doses, but great caution must be exercised to adminis-

ter it, for it may cause over-sexual excitement which is dangerous to life.

(2) The bones :—the disease usually begins in a carious tooth, which gnaws and throbs and sometimes shoots with itching and bleeding of the neighbouring gum ; then gumboils form and discharge fetid pus in which are found granules of bones. It increases the production of osseous matter to thickening of the spongy and greater density of the compact substance of the long and short bones.

So we see that it has the power of bone-production in cases where it is defective, as in osto-malacia and Rachits and where it is needed in temporary excess, as in fractures, intra-periosteal resections and transplantations of this membrane. It is useful in some forms of periostites and necrosis. According to Kafka, it is a most efficacious medicine in conjunction with *Natrum mur* in interstitial diseases of vertebrae and of the cancellous structure of the bone in general.

Dr. Hughes used it in cases where carious tooth irritation was present and praises it with Dr. Bayse in many affections of the teeth and gums.

(3) Alimentary Canal :—It sets up an irritation of the interstitial connective tissue of the stomach causing a chronic indurative gastritis with thickening analogous to scirrhus of the liver. We have seen in *chronic degeneration* of the mucus membrane of the stomach it to be a potent remedy. In chronic dyspepsia characterised by sour risings, heat at the epigastrium, flatulence and canine hunger it is of very good efficacy.

Hahnemann himself mentions *chronic diarrhea* with soft and thin stools as a special indication for it and acts more specially on nervous subjects and delicate children. Mr. Proctor found it very useful in *cholera* in checking the drain of brownish fluid from the bowels which sometimes continued after other symptoms have abated.

It also acts most powerfully upon the rectum. Dr. Hughes

asserts confidently in chronic diseases of the lower part of the bowels and quotes from Allen, who emphasises the involuntariness of the discharges as having been clinically confirmed.

(4) Respiratory Organs—Here it acts as a pure irritant and occupies a high place in the homeopathic therapeutics of respiratory affections. In *Pneumonia* it has won its laurels. Kafka thinks it suitable only to catarrhal (broncho)-pneumonia, but Bahr and Mullar incline to limit it where nervous symptoms appear.

Dr. Hughes says that in typical "croupous" pneumonia, excited by exposure to cold and accompanied by much pain, *Bryonia* is more homeopathic than it.

But if the exudation is rather corpuscular than fibrinous then it is preferable to other ones. It is equally suitable, in *acute pulmonary congestion*, with Aconite, even when fusion has taken place. Bahr praises it in *acute oedema pulmonum* and in *Broncho-Pneumonia*—the catarrhal or lobular of the nosologists.

This drug is also of great service in many ways in Pulmonary Phthisis and keeps down the hyperaemia of the lungs, quiets the cough and often moderates the diarrhoea. We have often seen incipient symptoms of chronic pulmonary mischief clear away under its use, but cannot credit with any power of checking the deposit or development of true tubercle.

(To be continued.)

J. K. Maitra.

Repertory of the Mind.

(Continued from page 168.)

By Dr. B. B. Chatterji of Benares.

Alone ; Fear of being—; fears. She will die. Kali-Carb.

Alone, Fears to be left—; lest he do himself bodily harm. Ars.

Alone ; Great sadness when—; hallucinations, delirium. *Aethusa Cyna* ;

Alone, Restless when—; longs for company. *Mezerium*.

Alone, wants to be—; Dread of men,— or dread of solitude with irritability and melancholy. *Lycopodium*.

Alone ; when ; an insane desire—; with her husband, whom she adores, to kill him, *Nux-Vom*.

Alone, when—; Anxiety : with flushes of heat ;—; especially in the evening, also when awaking at night ; especially evenings, as if it would impell him to commit suicide by drowning. *Drosera*.

Alone ; when—; at twilight ; about the future ; during a thunder-storm ; Anxious, restless—; with palpitation. *Phos*.

Alone, when—; In evening—; felt as if he would see something if he should turn around ; as if some one were back of him. *Bromium*.

Alone, when—; or on going to bed, Dread of death—; *Ars*.

Alone, when—; Sad, depressed and desponding—; *Bovista*.

Alone, wishes to be—; Cannot bear reading or conversation ; *Nux-Vom* ;

Alone, wishes to be—; Irritable mood,—; *Bry* ;

Alongside of him, thinks another person lies—; or that one limb is double. *Delirium* ; *Petroleum* ;

Also after emission, Depression of mind ;—; with regretful mind. *Hamamelis* ;

Also after menses. Depression of spirits ; *Ferrum-met* :

Also after mercurialization. Excitation as if intoxicated ;—; *Kali Iod* ;

Also after sun-stroke. Memory weak : loses thoughts before she can give them utterance ; weeps about her weak mind ;—; *Strapo* ;

Also bad effects therefrom, particularly vomiting and diarrhea.

Anger, with indignation ;—; *Colocyn* ;

Also before a rash. Dullness of senses ;—; *Stramo*.

Also during menses. Irritable and chilly ;—; *Zingiber* ;

Also, in gastric affections. Depression of spirits ;—; *Podo*.

Also in meningitis. Great anxiety ;—; *Hypericum* ;

Also religious, Disturbed state of mind,—; taciturnity, haughtiness, voluptuousness and cruelty. *Platina*.

Also till evening. Anxiety, with sweat ; afternoon,—; Notrum.

Also when recovering from spasms. Foolish happiness and pride, thinks herself in possession of beautiful things ; even rags seem beautiful—; Sulphur.

Also with oppression of the chest, driving him from place to place. Sudden anxiety, with angina-pectoris,—; Tabacum.

Alternate cheerfulness and melancholy. Carbo-ani ;

Alternate, exaltation and melancholy. Stramo.

Alternate laughing and weeping, with great anguish and fear of death. After anger,—; Platina.

Alternate stupor and delirium. Acetic-ac.

Alternately ; congestion—; to head and heart. Loses senses, sinks down unconscious,—; Glonoin ,

Alternately, cried and laughed—; gesticulated lively. Hyos.

Alternately. Despondent and buoyant—; Nux-Vom.

Alternately peevish and cheerful. Aurum-met.

Alternating ; chilliness—; with heat, after anger,—; vomiting of bile and thirst ; great laziness and aversion to occupy oneself. Nux-vom.

Alternating ; Great irritability,—; with indifference. Sepia.

Alternating ; Great merriness,—; with occasional momentary quiet or gloominess. Asarum-Europ ;

Alternating; ill-humor and lively mood,—; Changeable disposition ; depression and hilarity; or,—; Crocus.

Alternating ; Joyous feeling,—; with irritability. Cyclamen.

Alternating ; Lassitude,—; with great mental activity. Aloes.

Alternating ; Stupors—; with dangerous violence. Absinth.

Alternation ; Hysterical—; of laughing and weeping. Phos.

Always better when doing something, when the mind is engaged. Hellonias.

Always ; must change—; to something else. Mental restlessness ; when reading cannot dwell long on one subject,—; Drosera.

Always ; thirst—; precede the severe symptoms. Depression, dullness of intellect and—; Lilium-tig.

(To be continued.)

Hints.

Ficric acid in olive oil, according to Dr. L. C. Wells, Cambridge, O. cures burns rapidly and markedly mitigates the pain.

For lingering cases of malaria there is nothing better than *Natrum mur.* 12x, Headache. No thirst, during fever calls for it.

For genuine hay fever *Arundo maur.* 3x is as near a specific as we may hope for. Its proving is a complete picture of the disease.

If the baby has a large head which sweats freely and it is not very vigorous *Calcarea carb.* 6, or, better, 30th, will aid it.

Where there is leucorrhœa and rheumatism in women, shifting pains, *Caulophyllum* 1st may bring relief. The Indians named it "Squaw root."

Where there is the peculiar condition of illness worse before a thunder-storm and fearful dread of same *Rhododendron* 3 is the remedy.

A broad generality is that when one's physical state will not permit him to rest and he (or she) is better from motion *Rhus tox.* 6 may give the sought for relief.

Child's nose is dry and breathing through it is difficulty or impossible, *Sambucus* 3 may give relief.

Thin, watery discharges from sores, ulcers, cancers, etc., *Silicea* 30. Patient dreads cold, and wants head wrapped up. Headaches where patient wants head wrapped up.

Dry, barking, whistling, rough cough, *Spongia* 6.

Extreme exhaustion, *Stannum* 30.

A preparation, "Anti Rhus," is said to be excellent for rhus poisoning. So is *Anacardium* 6 internally.

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লাভি তাহাতে বিস্তৃত ঔষধ সুলভ মূল্যে
(১৫, ১০ পয়সা ড্রামে) অনায়াসে
মিতে পারা যায় ইহার বিস্তৃত বিবরণ
জানিতে চাহিলে আমাদের নিকট পত্র
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উল, ইত্যাদিও সুলভে দিয়া থাকি।

মজুমদার হোমিওপ্যাথিক ফার্মেসী

২৫ নং চৌরঙ্গী রোড—

এবার লণ্ডনের সুপ্রসিদ্ধ ঔষধ বিক্রেতা ই গুল্ড এণ্ড সন্স হইতে অপরিমিত পরিমাণে নানাবিধ আবশ্যকীয় জিনিস পত্র আনা হইয়াছে। অর্ধ আনার টিকিট দিয়া পত্র লিখিলে কাটালগু পাওয়া যায়।

একোনাইট, বেলাডোনা, হাইড্রাসটিস, আর্গিকা, রসষ্টক্স, ইত্যাদি নানা বকমের লিনিমেন্ট—প্রত্যেক শিশি ৬০ আনা, গুল্ডস এন্টি সেন্সিটাইভ টুথ পাউডার—ইহা দন্তশুলের কি মসৌষধ, কিছুদিন ব্যবহার করিলে নড়া দাঁতও বসিয়া যায়।

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ওলাউঠা চিকিৎসা	৬০
প্রথম গৃহ চিকিৎসা	১১০
স্ত্রী চিকিৎসা	১১০
অস্ত্র চিকিৎসা	১২
শিশু চিকিৎসা	১১০

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বেঙ্গল মেডিকেল লাইব্রেরীতে পাওয়া যায়।

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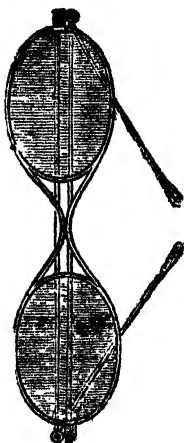
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এখানে সকল প্রকার হোমিওপ্যাথিক ও ইলেট্টো। হোমিওপ্যাথিক ঔষধ, প্রোবিউলস্, পিলিউলস্, কাইল, কর্ক, পুস্তক, ড্রুপার, গার্হস্থ্য চিকিৎসার বাস্র, কলেরা-বাস্র প্রভৃতি প্রচুর পরিমাণে পাইবেন।

সরল গৃহ চিকিৎসা।

গৃহে গৃহে হোমিওপ্যাথিক প্রচার উদ্দেশ্যে এই পুস্তকখানি সরলভাষায়, মূলত মূল্যে প্রকাশ করা হইয়াছে, এই পুস্তকে নতুন ব্রতী চিকিৎসকদিগের তত্ত্ব আমরা প্রত্যেক পীড়ার নির্দিষ্ট ঔষধগুলির সচরাচর ব্যবহৃত ক্রম উল্লেখ করিয়া দিয়াছি, গৃহস্থ ও শিক্ষিতা বামাগণ পর্য্যন্ত ইহা দেখিয়া সহজে তাহাদের সম্ভান, সম্ভতিগণের চিকিৎসা করিতে পারিবেন।
মূল্য—৮ আনা মাত্র।

ওলাউঠা চিকিৎসা।

ওলাউঠা বা কলেরা অতি সাংঘাতিক পীড়া। হোমিওপ্যাথিক মতের চিকিৎসাই ইহার একমাত্র উপায় তাহা বোধহয় সাধারণকে আর বুঝাইতে হইবে না, তবে প্রথম হইতে সীতি-মত ভাবে চিকিৎসার আবশ্যক। সেই জন্য প্রত্যেক গৃহস্থের একখানি কলেরা পুস্তক ও ও কিছু হোমিওপ্যাথিক ঔষধ রাখা কর্তব্য। রোগীব শয্যাপার্শ্বে বসিয়া বড় বড় রাশি রাশি পুস্তক হাতড়ান অপেক্ষা ইহা স্মৃতিতে অতি সহজে, অতি শীঘ্র, রোগের লক্ষণ দেখিয়া ঔষধ নির্বাচন করা শ্রেয়ঃ, ইহার ভাষা অতি সরল, মূল্য—১/০ আনা মাত্র।

সাধারণ মূল্য—মাদার টিং প্রতি ড্রাম ১০/৬, ২ ড্রাম ১০/০, ১ম ইন্ডিতে ১২ ক্রম পর্য্যন্ত ১০, ২ ড্রাম ১০/০, ৩০ ক্রম ১০/০, ২ ড্রাম ১০/০, এককানন ৫, টাকার ঔষধ, লাইলে শতকরা ১০০।
বিঃ কমিশন পাইবেন। পত্র লিখিলে সচিব কাটালগ পাইবেন।

বটিকর পাল এণ্ড কোং।

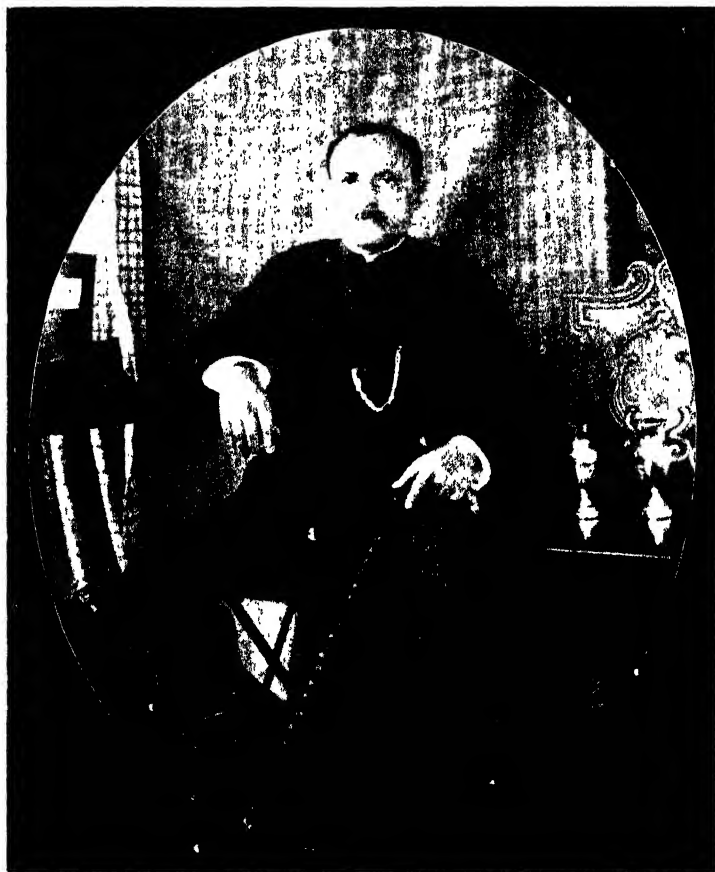
গ্রেট হোমিওপ্যাথিক হল, ১২ নং বন-কিন্ডস লেন, — কলিকাতা।

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The Late Bepin Behary Maitra, M. B.

THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII.]

SEPTEMBER 15, 1904.

[No. 9.]

Popular Errors about Homeopathy.

Here in India, as in every where else in the world there are some curious misconceptions about Homeopathy in the popular mind, with which we, the Homeopaths have to combat almost everyday. These erroneous notions seem to offer more or less serious impediments in the path of Homeopathic progress ; and the faithful followers of Hahnemann are certainly in duty bound to root out these mistaken ideas from the mind of the ignorant laity, whenever an opportunity presents itself. If we enquire into the origin of these popular notions, the methods of treatment that were in vogue in India before the advent of Homeopathy offer a partial explanation about it. The hoary-headed Kabiraji system, and the subsequent Allopathic practice, both of them have left an indelible impression on the minds of the general public which cannot be blotted out in a hurry by our more recent Homeopathic methods. Some of the misconceptions have obviously arisen from the wrong interpretations given by our antagonistic parties, who cannot or perhaps will not

understand the true meaning of Homeopathic principles. Lastly, there are those which have their origin in the thoughtless assertions of some begotting and foolish members of our own ranks who practically spoil the cause which they really love at heart. On that account I suppose, that it will not be mere waste of time if we discuss some of these popular errors about Homeopathy in the course of a brief essay.

There is a practice prevalent both among the Kabi-raji and Allopathic physicians that when a medicine whether single or compound, is found efficacious in the cause of the treatment, that medicine must be continued for a length of time, twice or thrice regularly every day, in order to get the maximum of benefit that can be obtained from the drug. This procedure is quite contrary to the fundamental doctrines of Homeopathy which teaches that the administration of our medicines must be stopped as soon as we find that it has produced a good impression on the vital economy. It looks quite incomprehensible to those of our patients who are not much accustomed to Homeopathic treatment ; and consequently they clamour for a large supply of the medicine which has already done them good. Of course we have a nice loophole of escape when we have a pretty large quantity of sac-lac, unmedicated globules in one drug store.

Some of our patients choose to consider that the Homeopathic Doctor is a sort of magician who can perform miracles at times with a lucky hit of drug-selection. Depending upon this supposition they sometimes do great injustice to the Doctor whom they have called to undertake a difficult case of disease. They expect the Homeopath to come or at least to show some remarkable benefit in a case of chronic disorder within 3 or 4 days which has baffled the greatest skill of Allopathic or Kabiraji physicians for months together. They become discontented and discouraged if we cannot cure a long-suffering chronic malady within a few

days, while they will allow doctors of other schools to medicate them fruitlessly for two or three months without a single word of protest. It is beyond their understanding to observe that Homeopathy is a regular scientific system of treatment which requires time and repeated medication according to the nature of the case, and not a mere magical trick of jugglery which can be performed in an instant. On account of such misconceptions we frequently receive very unfair treatment at the hands of our patients and are branded with the stigma of failure when really we have not been given a fair trial. And what is more regrettable is that the honoured name of Homeopathy suffers in reputation and irresponsible people shout out in all directions that Homeopathy could not do any good in such a case. It pains me to observe that this mistaken notion of the public has been produced in many instances by the bragging utterances of some unthinking members of our own school who say on their first visit to a patient that they are clever enough to cure him within 3 days. Whether such a doctor is a knave or a fool, or both, I am not ready to discuss at present; but I would emphatically protest against such nonsensical prognostications.

Homeopathy has no purgatives. This is a notion which is very common in the popular mind. Certainly we have no such medicinal substance as will bring on a free evacuation of the loaded bowels in all human bodies, whenever it is administered to them. But have we any need of a substance like that? The exhibition of a purgative medicine for evacuating purposes is contrary to the principles of true Homeopathy; and there is a plenty of drugs in our own *Materia Medica* which when given according to the symptomatic indications can bring about a normal action of the lower intestines, if such an occurrence be really wanted by the physical economy of the patient. And besides, in obstinate cases of torpor of bowels, the injection of a little glycerine into the rectum, or a little soap water or tepid water enema,

means which any consistent Homeopath may adopt without objection. In very many cases, the patients and their friends hanker after a purgative, where really there is no necessity for it.

Many people have been known to entertain an idea that Homeopathy is useless in fevers, which however, I am glad to note, is gradually vanishing from the public mind. For ourselves we treat several cases of fever every day and the result is in every way quite satisfactory both to ourselves and our patients. I am ready to admit that the Homeopathic treatment of fevers requires greater skill and more intimate knowledge of *Materia Medica*, and on that account unskilful prescribers meet with many a failure in fever cases. But that should be no reason why Homeopathy must be pronounced faulty for the defect of those that handle it ignorantly. Homeopathy is a thoroughly scientific and universal system of treatment which is applicable to all sorts of diseases that human flesh is heir to.

There is a belief in certain quarters that the Homeopathic treatment requires a very strict and scanty regimen on the part of the patient. But it is only an erroneous assumption which has no basis on facts. Certainly we do not restrict the patients diet to a greater extent than is the custom with the practitioners of other schools of medicine. There is scarcely a word of protest, if a patient of tobacco-smoking habits wishes to go on with his favourite *hooka* or a confirmed opium-eater desires his comfortable opium-pills at the appointed hour. Like all other doctors, we can only impose those restrictions which the nature of the disease demands.

Lastly there is that stupid and ludicrous assertion made by many a wise man, that there is no surgery in Homeopathy. Just as wisely, they can exclaim that there are no thermometers in Homeopathic practice. Perhaps they suppose that lancets and scalpels are an

inherited property of the Allopathic medical men, which a Homeopath has no right to possess. Let it be fully understood, however, that we are as free to use a knife in suitable case as any other doctor in the world. But the field of surgical interference is more limited in the case of Homeopathy which has the glory of possessing a large number of drugs which can take the place of surgery in a more permanent and painless way. I can recall to my mind quite a number of cases where the use of the knife has been avoided by the judicious administration of Homeopathic medicines. But in cases where surgical action is imperatively necessary, we should be ever ready to handle the instruments with a steady and firm hand. We must not bring shame and reproach upon the Homeopathic profession by insisting upon no-surgery, where a little incision can settle an affair in a couple of days.

These are a few of the popular errors which still rule the mind of the laity. These serve as thorns in the path of Homeopathy, and every lover of the science should make it one of his duties, to brush them aside by the influence of words and deeds. We should tear away the veils which prevent the Light of Truth from shining out in its pristine glory.

Nripendra Nath Set, L. M. S.

Cases from Practice.

1. *Puerperal fever-Apium Vir 200* :—I was called to see a thin and emaciated lady about 20 years old suffering from fever with cough, night sweats etc., and who has been treated from the beginning by homeopaths. It was about a fortnight since the fever commenced. When I saw her for the first time, she was very much reduced, had a very hacking cough, great burning of the whole body but no thirst. The fever generally came on in the afternoon and lasted for

four five hours and then it would break and leave the patient in a profuse sweat. The bowels were constipated. She had Pulsatilla, Calcarea and several other remedies before.

I gave her Lycopodium 30 and Bacill. 200 with no effect, and ultimately the fever yielded to *Apium Virus* 200.

II. An old gentleman aet 60 came to me for the treatment of his eye. The right orbit was a mass of ulcer, in fact the ulcers were so extensive and the swelling so great that the eyeball was completely covered by the ulcer. The sore was very sensitive and bled easily. At times there would be profuse hemorrhage from it. The left eye was perfectly natural. There was a syphilitic history dating some 30 years back. The ulcers had the typical cauliflower appearances. Hamamelis 3x promptly stopped the bleeding but failed to reduce the ulcer. Thuja 200 in occasional doses has had marked effect. The ulcer is markedly reduced in size, it has a much more healthy look and the eyeball has become quite perceptible. He is still under my treatment.

III. An old lady was brought to me for treatment of a growth that extended from the corner of the mouth about 3 inches in the buccal cavity. There was no discharge from it and it had the typical warby appearance. Thuja 30 was prescribed, to be taken every morning until marked improvement was noticed. I saw her again after two weeks when it seemed that she was somewhat better. Placebo was given for another fortnight, when she was brought to me. She did not seem to have progressed. Thuja 200 once a week. She was brought to me at the end of the month, when I found there was decided improvement. The growth was only an inch long, it was no longer perceptible from the outside and she looked better in every way. Placebo continued. She is still under treatment.

IV. A young boy aet 14 was brought to me by

his father for the treatment of a growth in the rectum which was about two inches long and which exuded a kind of sanguineous fluid. It was giving the boy immense trouble as he had great difficulty in defecation. It had the cauliflower appearance. I gave him Thuja 30 to be taken twice a day and Thuja in oil for external application. The boy made a perfect recovery in a month's time and the tumour disappeared completely.

V. A child aet 6 was brought to me for the treatment of an inveterate jaundice that had baffled all Allopathic treatment. She had slight fever all the time, the bowels were perfectly yellow, the region of the liver painful to pressure but no perceptible enlargement noticeable. Nux Vomica 30 twice daily for four days but no improvement observed. Chelid. 6x twice daily for a week reduced the jaundice considerably, and in three weeks' time it disappeared, the fever left and the child restored to health.

J. N. Majumdar, M.D.

What should a true Homeopath learn and unlearn.

(Continued from page 118).

Can one be a follower of a religion, if he does not know the principles of its prophet or founder of that religion? How can another be a Christian, if he be quite ignorant of the contents of the Bible? Is there any possibility that the third one can be comented as a Muhamadan, if he does not know anything of the Alkoran? So none can be a true Homeopath as long as he can not bring within his compass all the sections of our great master Hahnemann's first invaluable work *The Organon of the Art of Healing*. We cannot know that that illustrious genius divided the drugs into four classes namely *Nonantipsorics*, *Antipsorics*, *Anticyco-*

tics and Antisymphilitics, without reading his medical works. How is it possible for one who has no mastery over his five volumes of *Chronic Diseases* for which a separate *Materia Medica* on Antipsorics only is given? If I am supposed not to know anything of those books I will lose three fourths of my patients, though I know the theory of *Similia Similibus Curantur*, that is to say that totality of symptoms is the outward image of the inner disease, and the drug proved on healthy body is the drug which can produce the similar symptoms developed in our patients, by the drug. For our master says, "In order to cure gently quickly, unfaillingly and permanently, select for every case of disease, a medicine capable of calling forth by itself an affection similar to that which is intended to cure."

Though all the symptoms of my patient correspond with those of Homeopathic remedies, yet my patient must not be cured permanently if he be a psoric subject. Here totality of symptoms will not do without antipsorics. When our great master with his once-proved remedies was unsuccessful to give permanent relief to many patients suffering from chronic venereal diseases and psora, but behold, the Giver of all good permitted our inspired master to solve the sublime problem for the benefit of mankind after unceasing meditation and indefatigable research, careful observations and most accurate experiments, since the long two years 1816 and 1817.

In the last four volumes of *Chronic Diseases* containing the remedies for which most accurate experiments were made, are antipsorics. Hence his five vols of *Chronic Diseases* are complementary to the *Organon*, a book of vital importance to every Homeopath. It is a Bible to us. We shall speak a word or two on modes of noting the symptoms most important on the part of the physician, in our next issue.

N. H.

Editorial Notes.

We are asked by the Manager to request the Subscribers to send in their annual subscription before the October no. is out. It is now nearly nine months that the *Review* has been sent to them regularly and above all *free*, and it is now high time that the Subscribers should remit their subscription. The Manager informs that should the subscription be not paid up, the next number will be posted *v. r.* The October issue will be published in the first week of October as the Manager's office will be closed during the ensuing Pujah holidays.

* * * *

A Marvel in Surgery is reported from Scranton, Pennsylvania. As the result of an attack of pleurisy, the heart of Annie Riley, aged thirteen, moved from the left to the right side of the body. Thus it remained for twelve months, when by removing four entire ribs the surgeons restored the heart to its normal place. The girl is recovering.

* * *

We regret very much to announce the death of Dr. Bepin Behary Maitra, a well-known Homeopathic Physician of the town of apoplexy and failure of heart on Friday the 2nd September at the age of 52. He was a class friend of Dr. P.C. Majumdar, and a most valuable contributor to the pages of this Journal. His last article on *Change of type in Cholera*, which commenced in the April issue and closed in the August number, is valuable and instructive. Young physicians would derive much benefit from it. Our Manager has succeeded in giving the many readers of the Journal a portrait of Dr. Maitra with a short sketch of his life. From it, it will be seen that Dr. Maitra was not only a learned physician but a man of kind, gentle and amiable disposition. May we all try to imitate him in our daily life.

* * *

The Honorary Secretary of the Calcutta School of Homeopathy reports that the School is in a very flourishing condition. There are ten Professors, who are giving lectures to the students, and that the students are well pleased with their lectures. A Night Class has been opened in the Metropolitan Institution for the convenience of all persons who are employed in some work, and already a few have joined.

* * *

We are glad to announce that the Dispensary founded by the late Dr. Bepin Behary Maitra at 46 College Street, and which has since 1887 serv-

ed the poor of the town specially, has been placed under the able management of the late doctor's cousin, Dr. Jnanendra Kumar Maitra, who has been trained by the late Doctor and have been managing the same during his life. We do hope sincerely that the dispensary will keep up the reputation of its founder, and also wish the young doctor every success and trust that he will walk in the footsteps of his cousin.

* * *

Dr. P. C. Majumdar will shortly avail himself of some rest by taking a trip to Darjeeling for a month. We hope during his leisure hours there up in the cool Himalayan region he will write some able and instructive articles for the pages of his Review.

* * *

Dr. A. N. Mukherji has opened a nice Pharmacy for the public at 119 Grey Street, under the designation of *The Columbia Homeopathic Pharmacy*. The doctor's hours are 7 to 8 in the morning and 5 to 6 in the evening. We wish the doctor every success.

* * *

Our Indian Homeopathic Journals have become very irregular, only the other day we received the April number. We remind them that regularity and punctuality ensures success to a Journal, as will be seen from our own Journal. Our energetic Manager does not give us any rest, and his attempts have been crowned with success. But he requires some rest, so the November number will be published in the last week of November.

Contagion and Infection.

Certain diseases of men and animals have long been known to be communicated from one individual to another and recent investigations have shown that some of these diseases are not only communicable from one individual of the same species to another, but are interchangeable between animals and men, and between men and animals. The most recent enunciation of the scientific study of disease causation and possessing certain easily intelligible inherent possibilities is embraced in what is known as the "germ theory" of disease. The germ theory then assumes that the con

tagia are microscopic living particles organised in structure and for the most part capable of independent life both within and outside the animal body. The particles of contagia are really bacteriform organisms.

The contagion once introduced into the animal's body grows and multiplies enormously. The least atom of infectious material serves to inoculate Small-pox in a susceptible person but the contagion matter produced in the course of the disease would be sufficient to inoculate many thousands. In each special disease, the contagion multiplies chiefly in those tissues—the mucus and epithelial—which are more especially subject to its action and the infection is cast off from the body in large part with the secretions of these tissues. Freed from the body infection may be carried through the air from the diseased to the healthy or it may lie dormant in the clothes and furniture of the sick room for long periods and retain its contagious properties.

In other cases the contagion leaving the body with the feces and urine is propagated by means of water or food to which the evacuations may have gained access.

In some cases, the contagion is incapable of retaining their vitality outside the animal body. Here the infection is conveyed by direct contact, i.e. by direct inoculation from the diseased body to the tissues of the healthy.

I. Among the air-born contagious diseases may be mentioned:—Small-pox, Measles, Mumps, Chicken-pox, Whooping cough, Influenza, Diphtheria, Erysipelas.

II. Among the water-born contagious diseases may be mentioned:—Cholera, Enteric fever, Dysentery, Diarrhea.

III. Among the contagion by direct inoculation may be mentioned:—Ophthalmia, Syphilis, Gonorrhea, Tetanus.

In infancy, the bodily susceptibility to the action of various contagion is very great and their susceptibility

diminished with advancing age. From very early days it has been observed that second attacks of any contagious disease are exceptional. In other words, that an attack, even if a mild one confers immunity against that particular disease on the individual attacked.

Various theories have been advanced to account for this acquired immunity. Of these Behring's Anti-toxin theory is the best and is recognised by many.—Behring's theory holds that the blood of an immunised animal contains Anti-toxin which neutralize toxin as an acid neutralize an alkali and the resulting product being inert. We accept the fact that the blood serum of an immunised animal contains certain obscure substances called Anti toxins which appear to excite the cells of the body to both a germicidal and an antitoxic action.

This very desirable condition may be obtained by persons without undergoing the suffering and danger of an actual attack of disease.

The first method of which there is any record was inoculation against Small-pox which appears to have been pretty widely practised in India from a remote period. In India, inoculation was practised by Brahmans who went on circuit at regular seasons for the purpose. It is believed they used dried Small-pox scabs of the previous years. In the process of drying the microbe was weakened and the virus attenuated.

(To be continued.)

L. K. Ghosh, L.M.S.

Clinical Notes.

Case. 1. *Arum T in Typhoid, Fever*.—Babu—Chuckerbutty's son aet 6 years, had an attack of fever in the first week of September 1901. He was treated by a homeopathic physician who gave him Aconite, Belladonna, and so forth.

Fever went on increasing, the temperature in the beginning was 100 or so but which grew higher and attained the maximum of about 104°F. The boy was restless before complaining of burning of body and considerable thirst.

I was consulted on the 14th day of fever, when he was drowsy, with picking of bed clothes and trembling of extremities and several parts of body. His power of swallowing was also less free. Temperature 104°F.

Gelsimium 12x one dose three times a day.

Improvement was noticed at once, drowsiness less and the nervous symptoms abated considerably. The boy opened his eyes and asked for drinks, which was swallowed with a great amount of difficulty. There were cracks and fissures in the lips which he was boring since this morning.

Temperature was 102.4 in the afternoon. Now and then he had delirious talks Arum T 3x one dose morning and evening.

Almost the same in the next morning but the difficulty of deglutition more marked. The father of the patient was very anxious as he could not feed the boy properly. Milk and sago were given with great difficulty, some was thrown off by the nose.

Arum 3x again three times.

The boy had sound sleep at night and swallowing much better. Temperature reduced to 100°F in the morning. He wanted more food and to be carried to another room. No more medicine and the boy made a perfect recovery in a few days.

Case 2. *Tuberculinum in Fever*:—A young woman, about 25 years of age, married and mother of one child, thin and worn out countenance, presented at my clinic for treatment of fever and enlargement of liver and spleen.

She had been under Allopathic and Kabiraji treatment for a length of time which made her case worse.

She came to me on the 1st January 1901. I gave

her several remedies to check fever and reduce the enlargements of spleen and liver to no effect.

She had dry hacking cough day and night, and complained of some pain in chest.

Exaggerated bronchial breathing and dulness on percussion in the upper part of chest.

She was anemic and had jaundice eyes. Enlargement and considerable induration of the abdominal organs, viz., liver and spleen.

Appetite poor, no taste for food and bowels constipated.

Emaciation considerable, loss of flesh and strength.

Menstrual function stopped for the time being.

Mentally she was dull and some what irritable. She had a sweet temper when in health.

Tuberculin Cm one dose dry on the tongue and six powders of placebo for three days.

Reported no better, medicine was finished. Placebo for three days, again to be given twice a day.

After a week I visited the patient. She was cheerful and seemed to relish her food.

Temperature was still high. It was 102.4.

Placebo for another week. After this I gave her another dose of Tuberculin Cm. Since this dose she began to improve in every respect.

The fever was 99 F, skin moist and cool. Appetite returned.

I ordered for more food, chupaties and vegetable soups had been given.

Constipation was almost gone. She used to have one good stool every morning.

Perfect cure was effected in the course of four months. One or two more doses of Tuberculin Cm were required during these times.

P. C. Majumdar, M.D.

The Late Bepin Behary Maitra, M.B.

Dr. Bepin Behary Maitra, whose potrait is to be seen elsewhere, died at the age of 52 on Friday the 2nd. September, after a short illness of about a fortnight. He was attacked with a feat of apoplexy on the 18th August. He was apparently coming round, when suddenly his heart failed. Below is given a very short sketch of the life of the late doctor, whose loss is mourned not only by his family but by a large circle of friends and admirers who knew him or came across him.

Dr. Maitra was the eldest son of Babu Brojo lal Maitra of the well-known Maitra family of Santipur. Little or nothing is known of his early life, except that he was an intelligent, amiable and a good and quiet-natured boy, and that he had a great inclination to learn everything.

Leaving aside a period of some seventeen years, we find him in Calcutta studying for the First Arts Examination of the Calcutta University. Passing the same from the St. Xavier's College in 1872 with a scholarship of Rs. 20, he got himself admitted to the Calcutta Medical College. As a student of Medicine he distinguished himself greatly, having won the gold medals in Materia Medica, Comparative Anatomy, Surgery and Dentistry. He obtained two gold medals in Midwifery. In addition to all these he obtained certificates of honor in Chemistry, Ophthalmic Surgery and Pathology. In the fifth year class, he was assistant to Dr. Charles, the then Professor of Midwifery, and was also the Goodeve Scholar. In 1878, he got his M. B. degree standing first in order of merit. Thus we find that Dr. Maitra was a very successful student in his College career.

After leaving his College, he acted for about a year in the Campbell Medical School as a supernumary Professor. From 1880 to 1884, he practiced in Santipur his birthplace. In 1884, he came to Calcutta as a House

Surgeon of Chandney Hospital. In 1886, his uncle, Babu Horolal Maitra,—the father of Dr. Jnanendra Kumar Maitra, who has been acting as his assistant for the last few years—fell very sick. Dr. Salzer, the then first Homeopathic Physician, was called to treat the patient. On this occasion, Dr. Maitra saw the wonderful effects of Homeopathy. Little later on, Dr. Salzer succeeded in converting him to this new system of medicine, and accordingly Dr. Maitra resigned his Government service and adopted Homeopathy.

As a Homeopathic Physician he was connected with the *Calcutta School of Homeopathy* of Dr. P. C. Majumdar, where he used to give lectures on *Midwifery*. He edited a Bengali journal for two years, and was a most valuable and leading contributor to the pages of this Journal. He has written several good and valuable Bengali works on Fever, Childrens' diseases, Female disease, Cholera, and a easy domestic guide.

On the 27th June 1887, Dr. Maitra opened a Homeopathic Dispensary. Here in this dispensary till his death he treated the poor free and gave them medicines, as he felt for them very much.

Dr. Maitra has left a wife, a son, four daughters to mourn his loss. We commend them to the care of Him, Who is husband to the widow, and father to fatherless, and may He comfort them in their sore trial is our earnest prayer.

In conclusion, one word more needs to be said. As he was of high intellectual power, so he was a man of very high qualities. He was amiable and good-natured from his boyhood. He was kind, gentle, and was never found to be harsh or rude in his dealings, every one honored him, loved him, and regarded him, and Homeopathy has lost in him a fervent and an earnest physician, who tried to do all for the advancement of Hahnemann's medicine.

Notes on Materia Medica.

(Continued from Page 205).

Phosphorous :—In nearly all cases of *poisoning* by this substance, while symptoms of irritation have not been absent, another and a very different group of phenomena arrests our attention. The patient appears to be suffering from what used to be called "malignant jaundice." The skin and conjunctiva assume a more or less yellow tint and the stools are light, but in addition to it we see in it general typhoid prostration which cannot be seen in ordinary icterus. Pectechial and hemorrhages occur in various parts of the body ; the urine is scanty, high coloured and loaded with albumin. Cerebral symptoms—delirium, convulsion etc. somewhat like those of uremia—supervene and the patient dies in a few days in a state of coma. After the death of the patient if you examine the body after dissecting it, you will find that the fatty degeneration has involved nearly all the parts of the body specially the *heart* and *muscles* generally and all the secreting organs, as liver, kidney etc.

But what is their rationale ? Firstly, the answer is, that the fundamental lesion is a *acute fatty degeneration* which *Phosphorous* has the power of causing in every part of the body susceptible thereof. Secondly, that the neurotic and the hematic phenomena to the *suspension* of the *functions* of the liver and kidneys, owing to the metamorphosis of their secreting cells. Dr. Hughes attaches most importance to the affection of liver. He says that the symptoms are those of blood-poisoning, to which the nervous phenomena are probably secondary.

Its therapeutic bearings :—

(1) *Phosphorous* unquestionably deserves the fullest trial in "malignant jaundice," specially where the pathological condition is *acute atrophy of the liver*.

There is much resemblance of Phosphoric acid with the phenomena which accompany this lesion.

(2)* Dr. Holcombe suggested its use where *jaundice complicates toxic disorders* and notably in *yellow fever*. Recently Dr. Ozanam of Paris, seeing a poisoning case of this in which to the other symptoms black vomit was added, was forcibly struck by the resemblance of the phenomena to those of the *typhoid icterodes* and wrote accordingly. Dr. Hughes prefer *Crotalus* and the serpent poisons for such jaundice, which seems to be of different origin, that is, hematic rather hepatic.

(3) It is evidently a homeopathic remedy for that important pathological change known as *fatty degeneration*, whenever occurring. It is most obvious when this morbid process attacks the liver or the heart. Dr. Baer speaks highly of the former malady in chronic cases, and Hughes, of *arresting the progress of the disease in the cardiac substance*. Some one thought it to constitute *atheroma of the arteries* and *mollities ossium*; to be an occasional cause of *softening of the brain and chord* and occurring in the bronchial tubes to *predispose to amphysema*.

(*To be continued.*)

J. K. Maitra.

Gleanings.

Conducted by A. N. Mukherjee, M.D.

A new use for Urea.—William Ramsden has found a field of usefulness for urea hitherto unsuspected. It seems that it has the property of rendering albumin, the albuminoids, gelatin, etc completely solubles. Meat submitted to its action falls into shreads and becomes transparent. An entire frog in a solution of urea quickly becomes transparent A worm in the course of 24 hours

was decomposed, a part of it quite liquified. (*National Druggist*).

A new antidote for Carbolic acid poisoning :—A Veterinary Surgeon of Dublin was called upon to treat two horses that had been poisoned and gave one of them what he thought was olive oil but which was really turpentine. The benefit was so great that he gave some to the 2nd horse. Both recovered rapidly—it might be well worth trying to prove its value. (*Medical Age*).

Radium.—“At first when we handle the white powder we do not notice any ill effect, but in a week we are made aware of its influence, as the skin falls off and ulcers result which are slow to heal”—*Dr. Meyer*, M. B., in *Electric Review*. There is a hint for its internal use. There is now a trituration of Radium. It would be a good remedy for Dewy and his men to prove.—(*Editorial Brevities, Homeopathic Recorder*).

Tuberculinum—Should not be given lower than 30th, preferably higher potencies and in infrequent doses. According to Dr. Nelut it is contra indicated in the aged, in arteric sclerosis, in nephritis unless preceded by other remedies, and in children with dry harsh skin.

Carbonicum Sulphuratum—Is to be remembered in periphirat neurites, gradual failure of muscular power, showing itself chiefly in the extensor muscles of the extremities with formication and rheumatic pains, numbness and icy coldness of the extremities. Remember it also in sciatica. (*Homeopathic Envoy*.)

Gaultharia in gastralgia—Mr. A. aged 40, who had for several weeks been mentally overtaxed and exhausted, complained of growing, tearing pain < eating. *Gaultharia* ix was given with immediate relief. Dr. T. H. Bradford thinks *Gaultharia* specially indicated in gastralgia from exhausted nervous energy. (*Homeopathic Recorder*).

Fat face with Emaciated body, legs and arm.

Natrum mur—Emaciation begins in the neck, gradually extends over the body, which the face alone would not show it.

Abrotanum—Begins in the extremities and extends upward.

Stannum, Tabacum, Causticum and Baryta—have emaciation of the affected, single parts of the body. (*Medical Advance.*)

Rhus tox for heart Sprain—Heart trouble brought on by efforts to release from a wreck. *Rhus 6x* helped him markedly, showing that it is good for strains elsewhere. (*The North Am. Journal of Homeopathy.*)

Zizia Aurea in Chorea—Dr. Shanks cured a case of chorea with this drug in a girl of 16, she was tall, thin, pale, anemic and poorly nourished. She had choreic movements of the arms and at legs, also drawing and twitchings of muscles of the face. The latter movement sometimes played about the eyes and forehead, at other times about the cheeks or mouth. These spasmodic movements gave the face a strained appearance bordering at times upon sardonic. The movements continued in some measure during sleep. Improvement began within 48 hours and complete recovery took place in a few weeks. (*N. A. J. H.*)

• “*Pyrogen*” *Kent* says - “has the anxiety of *Arsenicum*, the restlessness of *Rhus*, the soreness of *Arnica*, the aching of *Eupatorium* and the rattling in the chest of *Ant Tart*”. (*The Medical Advance.*)

Anthracinum shows a markedly septic and malignant condition. Marked prostration with subnormal temperature. Intense burning pain. It has many symptoms that might call to your mind such remedies or *Ars*, *Carbolic Acid*, *Crotalus*, *Lachesis*, *Pyrogen* or *Secale*. In the terrible pains of cancer, carbuncle or erysipelas, it should be thought of in comparison with “*Ars* and *Euphorbium*”. (*Medical Advance.*)

Carduus Marianus for Varicose Veins—Dr. Windelband of Berlin, narrates a case of enlarged and inflamed liver in which he gave *Carduus Marianus* in decoction. The remedy cured the case completely in a few weeks, and in addition entirely cured some varicose veins with which the patient had been afflicted for some 5 or 6 years. He afterward tried the remedy in cases of varicose veins, uncomplicated with liver and spleen diseases, and seldom failed to cure. He states that he has records of 196 cases of varicose veins treated with this remedy of which 145 were bonafide cures. The large majority of the cases were of the many month's and most of them of many year's standing in women over 30. He afterwards discontinued the decoction and gave the remedy in the 1x five drop three times a day.—(*Medical Advance*).

Misusing a Répertory—If you make haste to prescribe the very 1st medicine that a répertory seems to suggest, you will find it a most useless book. The only way to use it properly is to let each important symptom suggest its own independent possibilities as if there were no other symptoms in the case at all. Then see which way these convergent lines seem to point; for after a while they are sure to converge in most cases if you have studied carefully enough, the deeper and broader symptoms of your case and the rare odd ones, which are often so characteristic of some one temperament.—(*Medical Advance*).

Selection.

I. WHAT TO EAT IN HOT CLIMATES.

The food question in warm countries is very important, especially for Americans and Europeans, among whom the mortality is generally excessive. M. Reynaud, professor of hygiene in the French Colonial Institute, has carefully studied the food voluntarily selected by European colonist and natives respectively, with a view to throwing some light on this question. The *Revue Scientifique* thus details his results and conclusions :

"In cold countries the substances absorbed in the largest quantities are fats. In fact one gram of fat produces by combustion a little over nine calories [heat units] whereas albumin or carbohydrate produce only four calories to the gram. Thus having to struggle against intense cold, men tend to absorb the foods that will produce the most heat. In hot countries on the other hand, the equilibrium of temperature often needs to be established in the opposite direction. the organism strives against its environment to prevent excess of heat—both passively, by avoiding all internal causes of heat, such as work or difficulty of digestion and also by perspiring. . . Thus the desiderata may be easily deduced. We must evidently have energy, for no matter in which direction the struggle for equilibrium takes place, there are both action and waste in the organism ; but incontestably less heating power is needed than when we have cold to overcome. Fat must therefore play a small part in the food, because it yields too many heat units in combustion, because it is hard to digest, and thus tends to raise temperature. and, finally, because its energy is less rapidly usable than that of the carbohydrates.

"Albumin is necessary as is well known. . . and for preserving the integrity of the tissues a minimum quantity of albumin is indispensable. This appears to be much smaller with the natives of hot countries than with Europeans.

"In any case, it is incontestable that albuminoids in too great quantities would be dangerous from their toxic products of decomposition, which in a sedentary life may pass into the organism and fatigue the liver which is so often attacked in hot countries. . .

"Carbohydrates are thus the best foods, but they are inconvenient because of the alimentary mass and the abundance of the waste product. This inconvenience may be lessened by the use of sugar, which is a carbohydrate that is practically pure, because it is crystallized. M. Reynaud believes that it also has some objectionable features, but this is far from being demonstrated. . . .

"The working ration cannot be treated apart from the mere living ration as it can in other regions. In hot countries, in fact there is no reserve, and work brings about at once, with perspiration, enormous losses of heat.

"The natives who get along very well with rations that are poor in albumin when they are idle, fall at once into a state of lassitude when they work, and easily contract divers diseases. There is a very great disproportion in hot countries between the working ration and the living ration. Without increasing the fat, which is utilized with difficulty by the organism and is hard to digest in these regions, it is necessary to increase the carbo

hydrates considerably, and especially the albumin. The minimum of indispensable albumin is much greater when, in spite of the work, it is desired to preserve the weight. . . .

"It is useful in order to preserve digestibility—a very important factor that is too often neglected in theoretical calculations—to give a varied alimentation, with fresh vegetables and fruits, as much milk as possible, and few alcoholic drinks. Much liquid must be taken to keep up the osmotic equilibrium lost by the intense evaporation. Much water is lost by transpiration, which it is evidently necessary to replace and it is necessary to drink also to facilitate diuresis which is often lessened by perspiration."

(*The Journal—The Englishman*).

II. STELLARIA MEDIA (CHICKWEED).

An Original proving of the Drug by the University of
Michigan Society of Drug Provers.

Compiled by A. E. Ibershoff, M. D.

SYMPTOMATOLOGY.

GENERAL.—*Lassitude* (6), indisposition to work. *Constant sleepiness* (6), awakes feeling tired and dizzy. *Chilliness*. General feeling of malaise. Tired, sore, strained feeling as from over exertion. *General irritability* (7).

HEAD.—*Dull frontal headache, worse on left side, < in the morning, < by motion, < by warmth, passing off toward evening, (12)*. Violent headache all over cranium. Dull pulling pain as if caused by a tight rubber cap. Dull headache extending upward from the eyes to the temples and to the back of the head. Cutting pain from temples through the frontal eminences. Throbbing pain in temples and in back of head with nausea. *Vertigo* (3). Dull supraorbital headache, worse over right eye, with faintness. Dull headache > by pressure of hand. Headache with nausea and perspiration > by going into cool room. Confusing frontal headache < from smoking, with great sleepiness and general lassitude. Stiffness and soreness of the muscles of the neck. Headache < from sudden jar or motion. Dizziness on awaking in the morning. Throbbing headache < by stooping over. Pain in the neck with stiffness in the muscles and headache < by motion. Dizziness < by turning the head.

EYES.—Pain in the eyes with nausea (3). Smarting and burning in the eyes. A feeling as if the eyes protruded. Lids feel swollen and hot, and eyes feel strained. Heavy sensation in the lids. Swimming before the eyes. Blurring of vision. Dry feeling in the eyes.

MOUTH—Dry. Thirst for small drinks at frequent intervals. A drink of cold water relieves the headache and nausea. Bad taste in the mouth on awaking.

CHEST.—Severe pain in chest on left side. Stitching pains in chest especially on left side, intermittent.

STOMACH.—*Nausea* (6) almost constant, worse in the morning with drowsiness and general lassitude. *Loss of appetite* (5) the smell of food nauseates. "A good dinner is not palatable." Flatulence and belching of gas (3). Stomach sensitive to pressure. Nausea without vomiting. Irritable stomach.

BACK.—*Sharp pains in small of back* (3) over kidneys, coming on suddenly, reach maximum slowly and stop suddenly. Dull ache in back (left side) from waist to shoulder. Sharp, stitching pains in left side of back in the region of the spleen, severe and intermittent. Lancing pains in small of back on both sides.

ABDOMEN.—Flatulent distention with griping pains in transverse colon. *Liver engorged, swollen, with stitching pains, soreness and sensitiveness to pressure* (3), < lying on right side. Pain in left hypochondriac region. Pain in epigastrium. Griping pain in small intestines (2).

STOOL—*Constipation* (4) or alternating constipation and diarrhea (3). Violent pain in rectum following stool. Clay coloured stool. Large, hard, dry stool accompanied with much flatus, anus sore and burning.

EXTREMITIES.—*Rheumatoid pains* in different parts of body (11). Pain in gluteal region extending down the thigh into calf of leg and ankle. Shooting pains in ankle, hip and knee. Dull ache in left arm and shoulder < by rest and warmth. Rheumatoid pain extending whole length of left arm. Intermittent pains in both shoulders, upper arm and neck on left side. Sharp shooting pain in right knee > by motion. Rheumatoid pains in joints of fingers of left hand. Dull pain in elbow and arm. Intermittent pain in left elbow joint > by motion. Crampy pains in muscles of right forearm. Lameness in right shoulder as if caused by rheumatism. Pain in biceps and extensors of the arm. Rheumatoid pain in right foot and leg. Pain in right shoulder and upper arm < after going to bed. Pain in scapular region < moving the arm. Sharp, shooting pain in left knee extending into ankle joint. Rheumatic pain in right shoulder < by lying on right side. Coldness of the extremities. Hands warm, feet cold.

MODALITIES.—*Worse*, morning; from warmth, tobacco, at rest. *Better*, in the evening; from motion, fresh cold air, pressure (headache), eating.

‘A Case of Chronic Dysentery cured by Antimonium Crudum’.

Patient—A daughter of Babu Tara Bhusan Banerji—a clerk of the Judge's Court. Nadia.

Age—2 years and a half.

The girl had been suffering from dysentery for the last two months. She came under my treatment nearly a fortnight ago on the 16th of August when I was first called in, I observed the following symptoms—

Stool—Brown, watery mixed with blood and mucus, undigested profuse, gushing, aggravation in the morning and at night. No colic before or after stool. Tenesmous once during stool.

Patient—emaciated, thirsty, but without any fever.

16th—I prescribed Podophyllum 6x one dose after every stool.

Result—Hard well-formed stool followed by mucus and blood.

17th—Placebo.

18th Aug—Podophyllum 30.

19th—A single dose of Sulphur 30. slight improvement.

20th 21st—Placebo.

On the 22nd the patient's father came up to me in a hurry with the information that the case had aggravated since the night before. The stools were yellowish brown, bloody mucus, very offensive smell, involuntary during sleep, great thirst, drank often but little at a time. The patient desired to lie down on the cool floor.

22nd—Arsenic 30.

Result—All troublesome symptoms gone, mucus and blood continued as before.

23rd—I again resorted to Sulphur 30., seeing (i) that the case was one of chronic dysentery, (ii) that there was perceptible improvement which, however, remained stationary, (iii) that there was a tendency to aggravation in the morning with great urging and tenesmous during stool.

Result—Stool well-formed followed by slight mucus and blood.

24th and 25th—Placebo.

25th—Sulphur 200 and dose.

Result—well-formed stool covered all over with bright-red blood but no mucus.

27th—Lumpy hard feces 4 or 5 in number covered all over with blood followed by pure blood. This symptom suggested to me Antim Crude, which I gave in the 6th potency for 2 days without any improvement. On the 30th I gave 30th potency and there was no blood. The patient is all right since.

B. C. M., Krishnagar.

Is Homeopathy Progressing!

This is a question that may be answered in the affirmative most emphatically. But has the progress been satisfactory and has it always been uniform everywhere in every country. Beginning with Gommern and Leipzig the birth-place and the seat of learning of the founder of Homeopathy, it has spread all over Europe and America, has in recent times progressed in many cities in Asiatic and African countries. When we read of the privations and sufferings of the master, when his faith in the old doctrine was shaken and the new light was beginning to illumine his mind, we are grieved and touched to the quick. But this wonderful success in Paris and in other European countries in later years and the miraculous cures of many princes and peers more than makes up for the troubles of the early days. Later the names of Von Grauvogl, Hempel, Bähr, Jahr and others, stand out prominent as the leaders of the cause of Homeopathy in Europe. The name of Hering is associated with the beginning of Homeopathy in America, the land of the Stars and Stripes, where almost every branch of Science has made the most progress at the present day. Here Homeopathy also achieved wonderful success and stands as the equal and rival of the other school of medicine; and all this in less than a hundred years. There are more than fifteen thousands well-qualified practitioners with about a dozen well-equipped colleges and an equal number of up-to-date hospitals. There is a general impression among our countrymen that homeopaths are not well-trained in the fundamental branches of the medical science. This idea is thoroughly erroneous and absolutely

without foundation, for in America the education in the fundamental branches namely, Anatomy, Physiology, Pathology, Bacteriology, Chemistry, Microscopy etc, are exactly the same in both the schools of medicine. In fact the first two years of the study are nearly the same in both the schools and I am told in one or two universities the students are taught in the same class excepting where Materia Medica, Therapeutics and Practice of Medicine are concerned. The names of Helmuth, Ludlam, Pratt, Van Lennep, Walton, McDonald, Shears and others are well-known among the renowned Surgeons of this world and all these men were homeopaths.

Perhaps the most that has been done for the spread of Homeopathy in America has been due to the efforts of such men as Hering, Dunham, Lippe, Wells, Lienthal, Allen, Farrington and others; and we rejoice to find that we have many more at the present day, who are working for the good cause and are quite able to uphold it. In England we have had a goodly number of Homeopaths and perhaps their literary achievement have been in no way less than those of their colleagues in America. Such men as Dudgeon, Hughes, Burnett, Dyce Brown, Skinner, Clarke are among the jewels of our profession. Here in England as also in India, it has not been able to make so much progress among the people as imperialism and conservatism rule supreme in the country and our efforts have frequently been thwarted by our friends of the other school because they have always had the upper hand in the matter as they are in power with the government. In the continent of Europe we have a sprinkling of Homeopaths almost in every country and in every city. The names of Bojanus of Russia and Cartier of Paris are well-known to us. We regret to find that homeopathy has not progressed in progressive Japan and I only pity the suffering of the people of that country.

In conclusion I should say that we are cheered to find that homeopathy has made much progress in India, although frequently we have to make our entrance into public favour in very much the same way as Kali Dass, the renowned Sanskrit poet, had to do in the court of the learned King Karnat where the Court poet would not allow any body to appear before the king, whom he found to be superior to himself.

in learning. In Bengal, particularly in Calcutta, the metropolis of India, Homeopathy has made wonderful advance in the last fifty years. Dr. Berigny and Babu Rajendra Dutt were perhaps the first to whom belongs the credit of introducing it in India, unfortunately the latter gentleman was a lay practitioner, but he came from a very well-known family in Calcutta and did much towards spreading Homeopathy in the city. Tonnerre is a name that is sometimes mentioned in connection with Homeopathy in the earlier days. The real credit for the spread of Homeopathy here belongs to Drs. B. L. Bhaduri, Mohendra Lal Sarkar and Leopold Salzer, three names that will always be remembered so long as Homeopathy lasts in India. Drs Pratap Chandra Majumdar and Chandra Shekhar Kali have done much towards popularizing Homeopathy in Bengal, particularly among the rural and the middle classes by their voluminous Bengali Writings.

In Calcutta homeopaths claim an equal share with our friends of the other school for the alleviation of human suffering, and these are the men who are upholding the cause of homeopathy in the city to-day :—Drs. P. C. Majumdar, D. N. Ray, B. V. Maitra, W. Younan, B. B. Chatterji, N. C. Halder, A. K. Dutta, H. C. Ray Chaudhury, A. L. Sarkar, C. S. Kali, T. K. Mukherjee, N. N. Sett, G. L. Gupta, J. N. Ghosh, A. N. Mukherji, S. K. Bose, and S. C. Dutta graduates of recognized Medical Colleges. Besides Calcutta we have Dr. Gopal Chandra Goswami in Serampur, Dr. Dayal Chandra Ghose in Chandernagar, Dr. P. N. Chatterji in Patna, M. N. Ganguly in Cawnpur, J. C. Ray in Pabna all regularly qualified men and distinguished homeopaths who have been the builders of homeopathy in this country, we have two three homeopathic schools in Calcutta which are still in a rudimentary state. There are several Charitable Dispensaries in and out of Calcutta. The Charitable Dispensary in Dr. Mahendra Lal Sarkar's house has a large number of patients attending daily. The Bhaduri Charitable Dispensary in connection with the Calcutta School of Homeopathy has a large clinic. Many people derive medical help gratis from the charity door in the house of Babu Bejoy Chandra Singh, son of our distinguished townsman Babu Kali Prasanna Singh, the translator of the Mahabharat in Bengali. There is a Charitable Dispensary at Natudah in the Nadia

District where patients receive homeopathic treatment perhaps the only institution of its kind in this country. This hospital is maintained by Babu Nafur Chandra Pal Chowdhury, the well known Zamindar of the place. There is another Charitable Dispensary at Chakdighi maintained by Babu Mani Lal Singh, son of Major Chakkan Lal Singh, our distinguished countryman. Thus we see that Homeopathy is ever progressing here as well as elsewhere.

J. N. Majumdar, M.D.,

Darjeeling.

P. S. While writing this article, I learn with great regret that our worthy colleague Dr. Bepin Behari Maitra, M.D. a distinguished graduate of the Medical College is no more.

Extracts.

Natrum Carb is suggested by Dr. Becker to cure a long-standing case of goitre, where the symptoms were a saltish, greenish expectoration, and a dry cough, which became worse on entering a warm room.

Natrum Carb. and Sepia.—In the functional disorders of women, it is often hard to differentiate these two remedies by their local symptoms. But if we make a study of other parts of the body, especially the mental symptoms, the differentiation becomes more easy.—Suggested by Dr. Chas. W. Becker.

Diabetes.—Dr. C. Mitchell calls attention to the fact that you cannot hope to do your best in diabetes, if you fail to carefully inspect and regulate our patient's diet but says that it is not always necessary to exclude all carbohydrates from the diet in mild cases, the more important point in such cases being to find out by inquiry just what articles of diet cause an increase of sugar in a given case and exclude only these. For it sometimes happens that food that will injure one person will not injure another.

We are always pleased to see any statement coming from one of large experience which emphasizes this fundamental fact that men differ widely, even when they have the same disease; and must be

studied one by one, if we are to do our best. And probably there are no four parts of the body that reveal the man and his individual character more quickly and clearly than mind, stomach, menstruation and skin. Other parts are not to be neglected, but these four will be found helpful in a much larger number of cases.

Dr. Mitchell, of course, speaks wisely when he emphasizes the importance of keeping up the general health of the patient by pleasant outdoor exercise, but when he strongly recommends mineral waters, it rather seems to us as though he were running into physiological treatment, which may, at times, prevent homeopathic remedies from doing their best and deepest work.

Cottage Cheese is a highly nitrogenous food, and has the advantage over meat of not adding to our uric acid burdens. It is readily made from the sour milk which accumulates in every household in warm weather. The milk should be heated a little short of the boiling point and then strained. If allowed to boil it becomes tough and tasteless. It is a very useful article of diet for diabetics and does much toward relieving their monotonous diet; for exhausted people who need strength; for convalescent people reduced by wasting disease.

Flavored with caraway seed, it makes a delicious sandwich with rye bread. It also serves as a nitrogenous balance, to figs, oranges, dates, rice and white bread. (*A Friend*.)

An exceptionally small nose often suggests that your friend had snuffles in infancy, and had it very badly. It sometimes indicates Aur., Hep., Sil. (See K. 351.)

People who have very large noses often times need Calcarea. We should be glad to have our readers suggest other remedies as well.

If you wish to give a beginner the keynote of Silica, tell him that it is oftentimes but a still deeper form of Puls. (See Allen's Keynotes.)

If you wish to explain Alumina, tell your friend that it is the chronic of Bryonia. (*The Medical Advance*.)

Human Bones as Article of Commerce The Italian police have recently discovered that the ancient and famous city of Padua is the

centre of a brisk trade in human bones. Acting on what their English brethren call "information received," they seized at the railway station a case addressed to Signor Corimo Cherubini, assistant in the Superior Institute of Florence, which was found to contain twenty human skulls. The sender proved to be an attendant in the Medical School of Padua. The police are said to have discovered that the trade in skeletons has been going on for many years, a fact which makes their sudden outburst of activity somewhat surprising, for there seems to have been little or no attempt at concealment. Letters were found which showed that the trade extended to France; indeed, there seems reason to believe that Italy supplies bones throughout the world. Three medical students have been arrested on suspicion of being implicated in the matter. Padua is famous in the history of Anatomy as school where Vesalius taught, and where—unless he is much belied—he sometimes took an active part in the "resurrection" of likely subjects. When a student at Louvain he procured skeletons from the gibbet, and in the great cemetery of Montmartre in Paris he fought starving dogs for the possession of bones. At Padua, too, our own Harvey learnt Anatomy from Fabricius Aquapendente, who showed him the valves in the veins, an observation which was to fructify with such splendid result in the young Englishman's mind.

(*The Indian Medical Record.*)

Repertory of het Mind.

By Dr. B. B. Chatterji of Benares.

(Continued from page 207.)

Amativeness. Phos.

Ambition. desire to do something and yet feels no—; Hurried manner; Lilium-tig;

Amiss. takes everything—; Sensitiveness, great excitability,—; Bovista.

Amorous songs. sings—; Lascivious mania, uncovers body, especially sexual parts; Hyos;

Amounting to frenzy. Violence,—; Apis-mel, ;

An emission. after—; apprehensive,—; Anxiety ;—; Carbo-ani ;

An evil deed, Anxiety, as after committing—; worse evening and after dinner. Veratrum-alb ;

An existing pain ; Thinking about—; causes it to disappear. Camphor.

An idea once fixed in her mind. She can not get rid of—; Stann.

An immense distance. a few rods—; Exaggeration of duration of time and space : a few seconds seem ages ;—Cannabis-ind.

An insane desire when alone with her husband, whom she adores, to kill him. Inclined to find fault and scold ; morose ; stubborn ;—; Nux-vom.

Anger, After—; alternate laughing and weeping, with great anguish and fear of death. Platina.

Angers, After—; chilliness alternating with heat, vomiting of bile and thirst ; great laziness and aversion to occupy one self. Nux-vom.

Anger, After fright with vexation or—; heat, congestions, threatened abortion. ailments from fright following later. Acon.

Anger. Ailments from fright or—; Arn ;

Anger ; Ailments from—; from chagrin ; child has spells of rage. Acon.

Anger, Ailments from—; mortification, or vexation, with indignation. Ipec.

Anger. Bad effects from violence and—Bry.

Anger. Caused by fright or—; Mania, with great pride ; fault finding ; unchaste talk ; trembling and clonic spasms ;—Peevishness. Muriat ac.

Anger, followed by quiet grief or sorrow. Ign ;

Anger or shame. Ailments from : excessive joy ; fright ;—; Opjnm.

Angers. least contradiction—; Excitable pettish,—; Ferrum.

Anger. Sufferings following— ; Alumina.

Anger, Very irritable, excitable and inclined to—; Carbo-Veg.

Anger, with habitual, malicious, spiteful disposition. Nux-Vom.

Anger, with indignation ; also bad effects therefrom, particularly vomiting and diarrhea. Colocyn.

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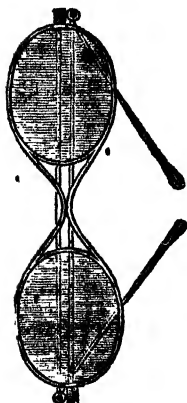
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•

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ঔষধগুণ সংগ্রহ (চতুর্থ সংস্করণ)	৫
চিকিৎসা তত্ত্ব (সংকরণ)	২১০
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স্ত্রী চিকিৎসা	১১৬
অস্ত্র চিকিৎসা	১২
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
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Vol. XIII.]

OCTOBER 15, 1904.

[No. 10.

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In cases of emergency and in cases where actual physical help is required, there is no doubt that operative and manual interference, and surgical help are at times necessary. But even here, after the operation or manipulation, the application of our remedies for internal use is of immense value. The cases where after operation Homeopathic remedies are administered, do get well in a much shorter time and in a safe and permanent way.

The Infantile Liver.

Within the last twenty years, our province of Bengal has given birth to a very familiar malady which is making a terrible havoc among our infant population. I mean the infantile cirrhosis of the liver or the simple "infantile liver", as it is popularly called by the laity. Many a home in Bengal has been rendered gloomy and desolate, and many a mother's life made miserable for ever by the disappearance of the beloved little ones under the cruel tyranny of this wretched disease. Cases are not very rare where all the babies have been snatched away one after the other, from the laps of hapless mothers, all being victims of this singular disease. Of course I do not mean to say that hepatic derangements were not observed at all among the children of the previous generations; but this insidious and intractable cirrhotic condition to which I refer to-day was a thing unknown in those days. If I am not great-

ly mistaken our American and European colleagues have scarcely seen a disease of this variety among the babies of their own country.

One of the most marked characteristics of this malady is that it mostly attacks the children of Bengali parents. Our province of Bengal contains men of various creeds and nationalities ; but you will seldom find a case of infantile liver in a Mohammidan or a European family. So prominent and universal is this feature of its etiology that in places far from Bengal, for example in the Simla hills, where our Government makes an annual exodus for eight months of the year, all the cases are observed among the children of Bengali clerks either of Hindu or Christian faith. The age at which it attacks the babies varies within wide limits. I have seen cases of prenatal origin in which the prognosis must be considered invariably fatal. But cases, which occur after the tolerably advanced age of three years or more, can be generally given a favourable prognosis. The majority of cases are met with between the physiological age of dentition and an age of eighteen months or thereabouts. The prognosis of a case can be pronounced as more and more favourable the older and older is the child at the time of its first attack. While we can hold out practically no hopes for a case occurring at the age of two or three months, those occurring at the age of three years can be generally brought round by careful and judicious treatment. Some of the cases of infantile liver run their course very rapidly ; good result can scarcely be expected from diseases of this nature. The psoric contamination of these little patients is so deeply seated that our well-selected Homeopathic remedies prove of no avail. Frequent relapses in the course of treatment do not speak well about the final issue.

The worst of all this is, that at the commencement of the attack, the little patients are scarcely brought to the notice of physicians. The unwary parents of the

poor baby do not generally think anything amiss, till an obstinate or oft-recurring fever attracts their attention which compels them to seek the advice of their medical attendant. But, by this time, the physician finds, by careful examination and enquiry, that the disease has begun two or three months before, and the liver has become pretty large in size. I can confidently assert that a considerable number of cases, if not of prenatal origin, can be effectively nipped in the bud by our Homeopathic medicines. But unfortunately we get the opportunity very very rarely. One of the earliest symptoms of its onset is persistent constipation and the disappearance of the normal yellow colour from the stools which may form hard round balls. With this the baby loses appetite and becomes weak and emaciated. This condition may go on for a month or two, before the feverish symptoms appear. Happy is the lot of the mother in whom these premonitory symptoms excite suspicions and lead her to consult her family physician.

A good deal might be said about the etiology of this singular disease, but I must confine my remarks within a short space. I am not fully aware whether or not our worthy friends, the germ-detectives have found out a powerful bacillus as the sole causative agent of this disorder. It is much more prevalent in the cities. In our metropolis of Calcutta, the rate of infant mortality owing to this disease is simply appalling. And the reason is not far to seek. The general insanitary conditions of large towns like Calcutta with its narrow ill-ventilated houses and impure food-supply affords a prolific breeding ground for dyspepsia, neurasthenia and other diseases which indicate a damaged health of its innumerable citizens. When we add to all this the high-pressure life, the luxury and the nervous tension that are the unavoidable accompaniments of an up-to-date city life, we feel no wonder that it ruins the health of thousands of youngmen and

women who bequeath a miserable heritage of thoroughly undermined constitution to their offspring. There is scarcely an Indian home in Calcutta where there is not a dyspeptic or hysterical mother, which is a matter of almost daily observation to the medical profession. This wretched condition of vitality is greatly augmented by the institution of early marriages, so prevalent in this country—a custom handed down to us from the time of the Muhammedan rule in India. The puny undeveloped couples are allowed to consummate their sexual relations, and it is no wonder that their children, the offspring of children themselves, will come into the world as pitiable specimens of humanity. Another exciting cause of this peculiar form of hepatitis is the supply of adulterated and injurious milk throughout the length and breadth of Calcutta. Excepting the mother's milk, the cow's milk is the principal diet of infants in this country. But in spite of the strenuous efforts and constant prosecutions of our Municipal Corporation, the cow's milk supplied to the citizens is generally of the most objectionable variety, which produces a very deleterious effect upon their digestive apparatus. Little infants can never be expected to properly digest this fatty and adulterated milk; and in this way they gradually acquire a chronic kind of inflammation of the delicate hepatic tissue. It has been observed in some cases that the entire withdrawal of cow's milk from the patient's dietary has shown remarkable benefit without the intervention of any medicine whatever. It can scarcely be denied that malaria which rages enormously in Lower Bengal is also an important factor in the causation of this disease.

All the characteristics of this infantile cirrhosis of the liver need not here be described in detail. The chief of them is the incipient beginning, which has been alluded to before. The condition of the liver when the disease is pretty far advanced gives a feeling of stony hardness which indicates a bad prognosis.

With a softer liver we can certainly give some encouraging hopes. The size of the organ is sometimes enormously enlarged, and in the case of big enlargements we feel some increase in the spleen with it. In cases due to malarial origin the enlargement of the spleen may be quite as big as that of the liver. From hypertrophy, atrophy comes in most cases which really accelerates the fatal issue. Constipation is the general rule but towards the latter part of the course in fatal cases diarrhetic and bilious stools may occur. In highly advanced cases, general anasarca, ascites, jaundice, bronchial troubles and other complications appear which lead the malady to a speedy termination. When the latter symptoms are observed, the poor patient is practically beyond any hope of recovery. Some of the cases run a very rapid course, and it seems they defy our best medical help. However, it is a matter of some consolation that cures have been reported from apparently desperate cases.

Regarding treatment, a few words will suffice for the present. It is now an established fact, happily recognised by the lay public that there is but one system of treatment for the intractable disease which is the Homeopathic. Infinite patience is required, both from the physician and the patient's relatives for the regular Homeopathic treatment, which must be continued steadily, calmly and thoughtfully for months together. As for drugs, I have seen only two things efficacious in this disorder—the *simillimum* and plenty of *Saclac*. Practitioners of our ranks are accustomed to speak of some special medicines as being specific in infantile liver. But in my humble opinion different cases require different medicines according to their symptomatic manifestations, and treatment by specifics is quite contrary to the individualizing principal of Hahnemannian Homeopathy.

Calcarea, Silicea, Lycopodium and Sulphur hold prominent places in its treatment, as they always do

in all the diseases of children. The value of *Saclac* as a first-class medicine should not be overlooked, and I have no doubt that many a case is spoiled altogether by a too frequent repetition of doses. A careful regulation of diet is a necessary adjunct to the successful treatment; and in many cases cow's milk, or mother's milk has to be stopped altogether. (*Homeopathic Recorder*.)

Nripendra Nath Sef, L. M. S.

The Invalid Food discovered by Dr. Nandy.

The lengths of time that different kinds of food require for digestion are no longer matters of mere conjecture, but are indisputable facts established by actual observation. It is known to the whole medical world that Dr. Beaumont and other distinguished medical men had a singular opportunity of examining the inside of the stomach of St. Martin. This St. Martin was a French Canadian, who was accidentally shot in the stomach in the Island of Michilimacinac, America. Dr. Beaumont extracted the bullet and treated him for over two years. His wound ultimately formed into a peculiar gastric fistula, which did not interfere with the functions of digestion. Finally, however, the orifice was filled by a small fold or doubling of the coats of the stomach which acted as a valve, and which could be easily pushed aside by the finger so as to command a view of the interior of the organ. The observation on the process of the digestion in the stomach extended over as long a period as 58 years from the time of the gunshot wound in 1822 down to the year of his death, 1880, and the process was watched by such distinguished medical authorities as Dr. Francis Garney Smith, Surgeon General Loven, Dr. Franklin Bache and other prominent members of the medical profession in addition to Dr. Beaumont.

The results of their observation are as follows ;—

TABLE.

Showing the length of time required for the digestion of different articles of food :—

	Hrs min		Hrs min
Rice boiled	1 0	Oysters raw	... 2 55
Sago boiled	1 45	Beef stake broiled	... 3 0
Barley boiled	2 0	Mutton roasted	... 3 15
Tapioca boiled	2 0	Mutton broiled	... 3 0
Milk boiled	2 0	Mutton boiled	... 3 0
Chicken soup-boiled	3 0	Veal broiled	... 4 0
Wheaten bread	3 30	Fowl domestic broiled	... 4 0
Egg-raw	2 0	Fowl domestic roasted	... 4 0
Egg soft-boiled	3 0	Duck domestic roasted	... 4 0
Egg fried	3 30	Duck well roasted	.. 4 30
Egg whipped raw	1 30	Butter melted	.. 3 30
Potato boiled	3 30	Cheese	.. 1 30
Cabbage boiled	4 30	Apples wect raw	... 1 30
Oysters fresh stewed	3 0	Turnips boiled	... 3 45
Oysters soup boiled	3 30		

The above results were supported later on by other distinguished medical men as Dr. J. H. Kellogg, M. D., William Osler, M. D., and all other authorities of the day.

Now it is almost a truism that in disease and convalescence, the food should be lighter than the ordinary one.

In European countries where meat and wheaten bread, requiring $3\frac{1}{2}$ to $4\frac{1}{2}$ hours to digest, form the ordinary meal, sago, barley, meat-soup, eggs etc., may be regarded as lighter foods. But in countries where the staple food is rice which is the lightest of all the foods in the above table, there is no rational ground for giving in disease sago, barley, milk-soup etc., which take no longer time than rice to digest in good health, and therefore a very much longer time in disease when the digestion is obviously weak. What, then, should be the invalid dietary in such countries? The researches of modern medical science have conclusively proved that the food that any person, habitually accustomed to, agrees better with him than any other. The question that now naturally arises is—How to render this food lighter so as to suit him in disease? This is the all-important problem of the day which has been exercising the medical world for a long time. It has at last been concluded that bread should

be dextrinised, and milk and meat peptonised, so as to render them easy of digestion.

Thus European experts have solved the problem for their own countries where wheaten bread and meal are the staple food.

It has long been a perplexing problem in physiological chemistry to find out a food suitable for use in disease in a country where the usual food in health is the lightest of all, namely, rice. Thanks to the energy, perseverance and the laborious researches of Dr. P. C. Nandy, the problem has been completely solved.

He has at last discovered a scientific method of dextrinising any kind of cereal by which it is rendered most easily digestible. His experiments have taken a practical shape in his dextrinised food for invalids. Dr. Nandy submitted his food for chemical analysis to the highest authority available in this country, namely, Dr. Schulten, the Chemical Analyser to the Bengal Chamber of Commerce, and other commercial bodies. The result of his analysis is as follows :—Proteid 11.58, carbo-hydrate 83.25, Fat 2.29, mineral matter 1.71, cellulose matter 1.22.

Dr. Schulten also certified that the food was dextrinised, and all the granules opened by bursting so making the food easily digestible.

According to recent discoveries in experimental medicine, a scientifically perfect food must contain the proteid and carbo hydrate in the proportion of nearly 1 to 7. Dr. Nandy's food contains proteid and carbo-hydrate in the proportion of 11.58 to 83.25 which is nearly 1 to 7. So it can be called a scientifically perfect food, and therefore it may be safely recommended by Doctors, as it will sustain the lives of their patient for an indefinite period. Moreover, this food, being dextrinised is non-fermentative. So it may also be safely used where the use of animal and starch food is objectionable, (where tympanitis, nausea, vomiting and other irritation of the bowels are present as in cases of Typhoid fever, low remittent fever, Pneumonia, Plague, Cholera, Diarrhea, Dysentery, Dyspepsia etc.) All these are no theoretical statements, but have been fully testified to by numerous medical gentlemen who have had a considerable opportunity of testing the food in their own practice.

It is now for the public to encourage Dr. Nandy by making a large use of his food, and to satisfy themselves practically of its merits by the benefits which they will undoubtedly derive from it. Dr. Nandy's discovery will benefit the richest and the poorest alike. The question concerns everybody every day. Charity begins at home, and if the leaders of our society and our public bodies desire to stimulate industry and scientific research they can do no better than begin with things ready at hand

before attempting more pretentious achievements. They can easily see their way to examining Dr. Nandy's food personally, and by experts with a view to extending to the deserving Doctor their moral support, should the food be really worth as much as is claimed for it. This is certainly not asking too much.

Reorganisation Scheme of the Sanitary Department.

The advent of plague and other epidemic diseases has made it necessary that special stress should be laid upon sanitary measures in India. It is no doubt true that the introduction of such measures has been found to be of great service in preventing infectious and contagious diseases from European countries.

The Government of India have from sometime past anxiously considered the advisability of initiating a policy of gradual and systematic improvement in the administration of the Sanitary Department throughout British India so as to render it a more efficient instrument for dealing with the numerous problem relating to public health which still call for solution. And the first step in this direction has been the appointment of a new Imperial Sanitary Commissioner, who is an Indian Medical Service Officer and with the assistance of whose advice and in consultation with local governments, the Government of India hopes to make much substantial progress in this direction. Now let us see how far this measure may be helpful to the Government of India in combating with the prevalent epidemic and other miasmatic diseases that are rampant in India.

Various Commissions have been held to consider the matter ever since 1859, but it was not till 1888 that the question of sanitation was vigorously taken up by the Government of Lord Dufferin. Sanitary Boards were formed consisting of officers of administrative experi-

ance and technical knowledge, to guide the people in the different larger provinces. Since then passed students of the Calcutta and other Medical Colleges have been appointed as Assistant Health Officer and Sanitary Inspectors under the Civil Surgeons.

The subject was again brought to the notice of the Government of India, by the Report of the Plague Commission in which they proposed that the Sanitary Department should be reconstructed on an enlarged basis so as to comprise all officers who are now students with the duties connected with public health, that it should be strengthened by the recruitment of scientific experts and subordinates qualified by a knowledge of Hygiene, and that the entire service thus formed should be placed directly under the order of the Sanitary Commissioner with the Government of India. The Government of India, however, does not intend to go into the details of the system now in vogue nor does it intend to form an elaborate Imperial Sanitary Department, but it only thinks that the office of the Sanitary Commissioner with the Government of India should be separated from the Director General, Indian Medical Service, in order that he may be able to direct his energies and time exclusively in this direction. In thus creating a new post, the Government of India does not intend to interfere with the action of the local governments in any way but desires that the Sanitary Commissioner should consult and confer with them informally in the same way as the Director General of Education, so that he will in no way be responsible for the doings of the local governments. He will no doubt offer suggestions which may or may not be accepted by the local bodies, moreover it is difficult to see how the existing system is to be remedied so long as the local administration remains unchanged and their actions not interfered with in any way by the Imperial Government. If the system be defective as it is suggested by the Plague Commission in chapter 7 of their

report, then it seems almost impossible that an officer with such restricted functions and power, would be able to do much towards reorganisation and reconstruction even though he happens to be a man of exceptional ability and with special training for the post.

J. N. Majumdar. M. D.

Editorial Notes.

Allopaths always try to find out something which is seldom of any use to the world and one theory is superceded by another to no benefit to any body. Here again something about malaria, which wants to upset the so-favorite a fad about mosquitoes. "It will interest students of the Malaria problem in India to learn that Dr. Ellinger, a medical man at Tegal, in Java, confidently asserts that he has found malaria parasites, and can breed them. He thinks the discovery so important that it will overthrow the mosquito theory of malaria advanced by Koch, Ross, and others. Dr. Ellinger found that these parasites lodge in the upper inner end of the throat, to which they make their way through the breathing of the patient. In other words, malaria is communicated by breathing the parasites in, and not through the bites of mosquitoes. Dr. Ellinger has cultivated these parasites and has brought malarial fever on by inoculating them in the body of patients. He asks medical men to test his discoveries."

Dr. Salzer was seriously ill at Kurseong, where Dr. P. C. Majumdar was called from Darjiling. He had an attack of bronchitis with spitting of blood and diarrhœa which prostrated him very much. Our readers will be glad to learn that he is now much better under Dr. Majumdar's treatment. In fact we are told that he is now convalescing. Dr. Salzer is now willing to pass the winter at Calcutta.

Natrum Sulphuricum is a wonderful remedy in cases of obstinate acute and chronic diarrhœa especially in cases after child-birth which is known in this country as *Sutica* i. e. purperal diarrhœa which is a very intractable ailment. Copious watery yellow stool, gushing and aggravated mostly in the morning with considerable flatulence and colic are its indications. It is also useful in malarial diarrhœa.

We are laughed at by our Allopathic brethren for our attempts to

cure a sinus an abscess, a necrosis, an appendicitis and et hoc genus omne by the administration of indicated Homeopathic remedies. We are grieved to see that many Homeopathic physicians, knowing not the merit and power of our *Materia Medica* and without giving sufficient trial to it, pose with our old school friends and declare that such and such things are impossible. The other day when we were going to cure a carbuncle in an elderly man, an Allopathic doctor of this city gave us a sharp rebuke and spoke in plain terms and told us that we were a set of imposters, because we always gave hope of curing surgical cases with medicines. We told him in as plain a term that when a cure is effected he will be sorry for what he said. So it came to pass but that brother unblushingly said it was a cure by nature.

Sometime ago our good friend Dr. C. E. Fisher of Chicago pointed out the Homeopathic applications of many of our valuable remedies in the treatment of surgical cases. It has been published in the pages of the Homeopathic Journals.

We find the following in the *Medical Advance*. "Homeopathic department of the University of Michigan—We are glad to see that Ann Arbor University is instituting the practice of occasionally inviting physicians from other Homeopathic colleges to come and lecture to its students. We believe such interchanges of inspiration and experience only tend to make a college broader and more helpful."

"*Argentum nitricum* in *Polyuria*—Dr. K. W. Higgins in the *Critique* reports an interesting case: A girl seven years old, dark, thin and irritable, had to pass urine four or five times every night in large quantities and could not attend school because she had to urinate so often during the day time. Has always been troubled this way; her mother, before the child was born, was not even expected to live because of kidney trouble. Argent nitr 30 in doses taken every night cured the case."

We learn with regret that Dr Dudgeon, the renowned Homeopath of England is at present ill and incapacitated from work. The disease originated from an acute attack of influenza.

Professor Bozzoli, Director of Clinical Medicine at the University of Turin, has communicated to the Royal Academy of Medicine, his observations on the surprising efficacy of the action of X-rays in the treatment of certain serious diseases of the blood. He stated that he succeeded in curing by X-Rays a case of leuchemia which was considered incurable.

Dr. C. E. Fisher reports that he has had signal success in his Railway Hospital at Court Orleans, Maryland, that he has had more than 400 pati-

ents with but five deaths. This is always the case wherever a Homeopathic hospital has been established.

A very interesting case of fibroma of the neck cured by Calc Iod 12 dec, is reported in the June number of the Calcutta Journal of Medicine by Hem Chandra Ray Chaudhury, L.M.S.

Erect a line from the right anterior superior spine of the ilium diagonally across the chest to the outer third of the left clavicle and this line would cross the heart at right angles and is well worth remembering as it will be of diagnostic value.

Pains over the iliac crests, the groins, the front of the thighs, the inner aspect of the legs or feet, or the big toe are often evidences of lumbar caries.

We learn from the *Homeopathic World* that among others a Dr. Ghosh of Calcutta is going to be elected a member of the British Homeopathic Society. Who is this Dr. Ghosh; Is it Dr. J. N. Ghosh, the Philadelphia Graduate. Then we congratulate the doctor heartily. But we have some doubts that it is not Dr. J. N. Ghosh. If that be the case then we can only say that there is no other Dr. Ghosh in Calcutta, who is a Homeopath and at the same time a graduate of a recognized Medical College either here or abroad. If there be one he will kindly send in his name and we shall stand corrected.

Cases from Practice.

Case 1. I was called to treat Sham Lal, a Hindu boy aet 15, who was suffering from an abscess in the iliac region for which he had been operated upon three times without success. The first day I saw him, I found an abscess in the right iliac region that was 3 inches in diameter and a quantity of grumous pus came out on pressing the right hypogastrium, showing that the suppurating process was extending upwards and an impending peritonitis seemed probable. The boy was very much emaciated, the right limb particularly so. He had hectic fever and was very much prostrated. Hitherto he was being treated by Allopathic medicines and had evidently derived no benefit. I dis-

carded all Allopathic dressings and advised that the wound should be washed with Calendulated water and dressed with aseptic dressings. Hepar sulphur 30 was given twice a day for four days, when I called again and found the boy in the same state.

Bacill 200 one dose, and no more medicine for 2 or 3 days. When I saw the boy again his fever had increased but the sore seemed to be somewhat better. It exuded a kind of watery pus now. All the other symptoms appeared to be the same as before. Placebo twice daily was prescribed for four days. This time when I saw him, I was rejoiced to find that the boy had made decided progress towards recovery. He had no fever; the wound also looked more healthy and very little pus came out on pressure.

No more medicine for a week. The abscess and the general condition remained improving, but two three new abscesses formed on the head, and he complained of profuse night-sweats.

• Calc Phos 30 twice daily for four days.

This time the boy showed marked signs of improvement. The abscesses on the head also seemed to be better.

At this stage I had to leave town on account of ill health. So I prescribed Calc Phos 30, and told them that the medicine should be taken once every day with occasional stoppages. After a month when I returned to town I found the boy hale and hearty. The iliac abscess was completely healed, the abscesses on the head had also disappeared, and but for a slight difficulty in walking he was all right. Now Calc and its compounds, I believe, should be repeated frequently for it has been my experience that they act much better in this way than when used at long intervals.

Case II Tonsillitis cured by Baryta carb 30. When at Darjeeling and while visiting a friend I was requested to help putting a little tannic acid and glycerine ointment into the throat of his son. He also said that the boy had

been suffering from this sore-throat for over two years. This medicine relieves him for the day but has not been able to cure him.

I helped painting the throat but told him that I would not have done it had the patient been under my treatment. I would have given him a plain and simple medicine to be taken inwardly.

Then I was requested to prescribe for him. I ordered for a dram of Baryta Carb 30 globules to be taken twice a day, four globules at a time.

In about 10 days from that he sent his servant to me asking for some more medicine. I was astonished to find that a whole bottle had been consumed in ten days. Then I was told that that boy has been cured by taking the medicine for four or five days, but now all the other children were taking the medicine as they all have the same complaint.

I was at Darjeeling nearly a month and I saw the boy the day I left the place and he told me that he was no longer troubled with that tickling of the throat.

J. N. Majumdar M. D.

Notes on Materia Medica.

Continued from Page 226.

Before leaving the liver, we must take notice that in diffused inflammation and in cirrhosis, both the forms of hepatic diseases, *Phosphorous* may prove serviceable. Dr. Salzer speaks warmly, also he remembered for jaundice, not only when complicating such grave maladies but also when occurring idiopathically. It sets up the *cattarrhal inflammation of the bile ducts* which causes this disorder; also it is one of the best remedies in *Jaundice from nervous excitement* specially in pregnant women.

(5) In its *renal and haematic* symptoms—the urine

highly-coloured and frothy, specific gravity increased, contain albumen and epithelial cells—Dr. Hughes agrees with Dr. Hempel in saying that, that is not Bright's disease but nevertheless a kind of *Nephritis* and warrants that *Phosphorus* may find a place in the treatment of such affections. Baher suggests its use in *chronic tubular nephritis when occurring as a result of long continued suppurations*. It should also be given in *primary fatty degeneration of the kidneys*.

Hahnemann, the father of our system of medicine, says in his pathogenesis that in *Phosphorus* "small wounds bleed freely," which has led to the choice of it in such cases as, *purpura and hemorrhagic small-pox* and has also conducted to very valuable and unexpected results in no less a disease than *Fungus haematoides*.

Dr. Broadbent cured a case of *essential anemia* by it, but we find no such result in its subsequent employment in such diseases.

We have seen a curious use of it in its power of curing *chronic mastitis*, where sinuses have been left in the gland after extensive suppuration. But this does not fall in any of the above categories. *Bryonia*, also, has some exceptional action on the mammae. Seeing these two of our important medicines of the chest diseases, have such power over the mammae, we wonder whether the local affinity has anything to do with it. Who knows that it has not?

In eye diseases its symptoms point to *choroidal congestion and retinal depression*, according to Drs. Allen and Nott. Dr. Goullon cured a case of amaurosis following cerebro-spinal meningitis; it should be useful for this affection when brought on by excess in venery and perhaps in tobacco. It has been proved to be a very good remedy in diminishing the recurrent neuralgic pain and checking the progress of degeneration in *glaucomatous eyes*.

Its suitability:—Dr. Guernsey says, that it is most

suitable for tall, slender women (he speaks only of that sex), *liable to sensation of great weakness and emptiness in the abdomen*, of heat running up the back with coldness of the feet and legs. The patients are generally costive, passing *long, narrow, dry, hard stools*, difficult to evacuate. Dr. Hoyne, mentions the face like polished ivory as indicative of the drug.

Phosphorus is so unique a drug that no single genuine analogue can be found to it.

Dose :—We prefer the 30th potency generally.

J. K. Maitra

Calcarea Arsenica.

The Arseniate of Lime is a remedy of very great importance as we have seen by its extensive use in various conditions and in various ailments. Hering, who was the first to prove it, justly remarks that the few symptoms enumerated in his "guiding symptoms" contain elements of great promise. Dr. P. C. Majumdar in a paper sent to the American Institute of Homeopathy in June 98 wrote as follows:—Arseniate of Lime is a grand remedy but I am sorry, it is not very extensively used by homeopathic physicians generally. It is a chemical compound of two very potent remedies viz : Calcarea and Arsenic. When Drs. Majumdar and Salzer made use of this drug sometime ago they were accused of having made use of remedies that have not been proved. It was proved some years ago by Dr. Constantine Hering in whose "Guiding symptoms" a clear and concise proving is given, from which we have gained much knowledge and derived great benefit. Hering says that he prepared and proved it in 1848 in the 4th centesimal trituration. There were four or five other provers who were well experienced but who did not know each

other till sometime after, thus testifying to the genuineness of the symptoms appended. Clarke in his Dictionary of Materia Medica gives as its characteristics :—Vertigo when moving the head. Flying or swimming sensation; as if feet did not touch the ground ; indescribably well. Rush of blood to head before an epileptic attack. Epilepsy with heart disease. The Headaches go from before backwards. Violent pains in right eye Delirium in the dark. Blue rings under eyes. Swelling of inguinal glands with tearing pains in legs. General dropsical swellings with albuminuria. Burning and heat in chest, feeling as if he would suffocate with palpitations. Every 4th beat of pulse intermits with great regularity. The fever symptoms are well-marked—intermittent, remittent, hectic and masked malarious. Liver and spleen enlarged. According to P.C. Majumdar, it is the most efficient remedy in the infantile enlarged liver and spleen of India. In albuminuria great sensitiveness of the kidneys. Cholera with impeded respiration from heart embolism. It is suited to lymphatic, scrofulous and tuberculous persons ; fat women approaching the climaxis. It is a chilly medicine, the symptoms being worse in cold weather ; when out of doors.

I have myself made use of this remedy in albuminuria, in cholera, in plague and in the enlarged liver and spleen of infants, a disease so common in Bengal but seldom heard of elsewhere.

I learned its use in the sudden failure of the hearts action in Salzers excellent brochure on cholera.

While writing on the chronic enlargement of the liver due to malaria in Oct 1899 I said ;—A remedy playing no less a part than those above mentioned (namely Nux Vom, Mercurius, Magn mur, Bryonia) and yet very seldom heard of is Calc ars. Its symptoms resemble Nux Vom very much, only the febrile aggravations are generally in the afternoon, where as in Nux Vom, they are mostly in the morning. In Calcars diarrhœa is the

most common thing, in Nux Vom just the reverse. Ascarides in children is also another symptom.

Now I will give you a few of the symptoms from the "guiding symptoms."

Great depression of mind. Congestion to head before an epileptic attack.

Burning in the head first left then right.

Head is hot in albuminuria Face swollen especially about the eyes in albuminuria.

After belching a burning in asophagus as from pepper with garlicky taste when swallowing.

No appetite during eveing after fever with thirst in afternoon. Acidity of stomach.

Gastric ulcer. May be useful in pancreatic diseases.

Cirrhosis of the liver in typhus with albuminuria.

Colic and looseness of bowels. Bowels very tense albuminous stools with ascarides.

Infantile diarrhea.

Region of kidney greatly sensitive to pressure.

Must pass wind every hour. Urine contains much albumen. Albuminuria dnring pregnancy. Loses voice and afterwards consciousness; before an epileptic attack kind of asthma waking soon after midnight.

Heart beat very strong in albuminuria. Back of hands œdematous. Collapse in heart and kidney affections, embolism in albuminuria.

Fever in afternoon, with sensation as if abdomen were puffed up; much thirst for cold water and afterwards loss of appetite in evening.

Bruised feeling in chest, Fatty degeneration of heart due to obesity. Heart and kidney diseases.

Its antedotes are Carbo veg, Glonoin, Pulsat.

• J. N. Majumdar M.D.

Contagion and Infection,

(Continued from p. 220).

Inoculation was also in common use in Persia, Arabia and in other Oriental countries. In China, the insertion into the nostril of dried crusts of small-pox, reduced to powder, was and still is practised.

Inoculation was also practised by the natives in some parts of Africa.

Vaccination is a kind of protective inoculation with the virus of small pox modified and altered by transmission through comparatively insusceptible animals. It prevents an actual attack and in other cases diminishes the fatality in those who are attacked. The protection lasts for a number of years.

The protection against rabies obtained by the system of inoculation adopted at the Pasteur Institutes in various parts of the world, depends on the attenuation of the virus by drying. The spinal cord of a rabbit which has died of inoculated rabies of added virulence, is cut into sections and placed in bottles over caustic potash which dries the air. These bottles are kept in a dark room and small portions are daily taken and pounded up into an emulsion with fresh broth for inoculation. The strongest Vaccine ordinarily used is one, made with cord that has been dried for five days, though in cases of very severe bites the treatment has been carried further, and cords dried for only one day used. An animal thus protected is proof against the most virulent vatic poison. The great value of this discovery is that, owing to the long inoculation period of the disease, it can be utilised by people after they have been bitten by rabid dogs.

As regards Preventive inoculation against cholera. Haffkine having worked out his systems in the Pasteur Institute, came to India to put it into practice and

test its efficiency. In this method two injections are given. The first is mild, and the second more virulent is given after an interval of 5 days. The individual is not fully protected until 10 days after the first inoculation. On account of the heavy mortality from cholera amongst the coolies on the tea gardens in Assam, the coolies are now inoculated at special stations on their way up. The protection thus afforded lasts for 14 months, but this protection is only against the attack. If an individual thus protected is attacked, the disease is as fatal as it would be in an uninoculated person.

Haffkin's plague prophylactic consists of broth containing dead bacteria and their products, toxins the former of which are supposed to confer a germicidal protection, the latter an antitoxic one. The protection so far as has been ascertained, only lasts about six months. Even this short duration of protection is however very valuable, because a particular outbreak of plague seldom lasts longer.

Clinical Notes.

P. C. Majumder, M.D.

Case. 1—*Carbuncle cured by Anthracinum.* An elderly gentleman of robust constitution complained of pain in the back, below the neck one day in July 1903. The next day he got fever and pain over the whole body. He had slight taint of diabetes mellitus for which he took some homoeopathic remedies and got cured long ago.

This time along with fever, his urine became profuse and frequent, and he was very much prostrated. He had strong faith in the efficacy of homoeopathic remedies; he took Rhustox himself in order to get rid of the fever and pain in the body.

These symptoms abated but his son noticed a swelling and considerable redness in the back in its upper third. He himself took Belladon 3x and 30 without much relief. I was called and to my regret found him suffering from Carbuncle of a severe type.

Fever came on generally in the afternoon from 3 to 5 P.M. with slight shivering and considerable burning of the whole body, especially the affected part of the back, complained of intense burning and cutting pain and dusky red swelling of the carbuncle. He had good deal of thirst, profuse urination, urine being red and scalding.

I gave him Arsenic 30, one dose every four hours. Diet, milk and sago.

Reported better the next morning when the fever abated but burning and prostration were very great. No medicine the whole day. Fever came again as usual and pain and swelling increased, lower part was swelling awfully. Anthracin 6 three doses this day.

Some parts of the Carbuncle got fluctuating, fever was less this evening and urine though profuse less frequent.

No medicine, the next morning, all his complaints remained the same. He had throbbing pain in the carbuncle and pus had formed.

Hepars 6 two doses a day. No improvement on the contrary burning returned and fever intense.

Anthracin 30. twice during the whole day. At night his son noticed three or four points from which thick yellowish pus came out. Pain relieved considerably and the red area became smaller in circumference, pus profuse and healthy and urine less in quantity and time. I gave him no medicine. Some sloughs were coming out day after day and the sore became cleaner. There was no fever now and he wanted to eat more. I gave him soup and some solid food. The sore was dressed with Calendula lotion and Calendula with sweet oil applied over the sore.

He made a perfect recovery in the course of three weeks. No other medicine was given. I forgot to mention that his urine was analysed at the height of his disease and it was found to contain about 5 grains of sugar per ounce and the specific gravity was 1032.

Case. II—*Sciatica, cured by Lycopodium high.*
Mr. C. S., an Eurasian gentleman about 35 years of age, strong and healthy looking, had a strong attack of Sciatic pain in the right side which disabled him to attend his office.

His mother had this kind of pain often for a long time and she was not completely cured. She died of some other disease. His two brothers got the disease but were cured. He had the same kind of attack first time about 5 years ago. He had allopathic treatment and got apparently cured. Getting pain now and again not so violently and had never been bed ridden, could attend to his office work.

He had this last attack on the 29th July 1901. He was treated in the same way for a length of time without much benefit, pain was very severe this time.

He placed himself under my treatment in the October of the same year. He was very much prostrated and had no power of moving about. Pain was aggravated in the evening. His appetite poor and bowels constipated. Naturally of mild temper he became very peevish.

I tried several medicines with not much amelioration. Rhus, Colocynth, Mercurius, Sulph were tried both high and low potencies. At last I gave him a dose of Lycopodium c m and some placebo powders. In a weeks time he was so much better that he attended my office. With one or two more doses of Lycopod he was completely cured.

Opening Address, Cleveland Homeopathic Medical College.

To-day is a time of war. The shriek of the murderous shrapnel and the clatter of the machine gun comes echoing from the Manchurian hills. The Yellow Sea has been tinged with red by the blood of mortal foes.

A nation has drawn about it the mantle of Christianity to conceal an amaurosis to the principles of justice, fairness and humanity. With wonderful celerity has a so-called pagan nation emerged from the dense fog of barbarism and astonished all Christendom with its power, wisdom and morality.

We too have assembled to-day to begin a campaign of assault upon the accumulated stores of medical lore. The shriek of the pain-racked and the wail of the mourner have aroused us to a consciousness of our calling, and we come not as conscripts but as willing volunteers, offering our lives as instruments in repelling the ravages of disease. The bugle call has sounded in schoolroom and factory, farm and store, and your presence here to-day betokens that you have presented yourself at the shrine of Aesculapius, and that you have resolved to devote your life to the service of your fellow-man. If you have come under the delusion that medicine is an elysium for idly inclined you might better retrace your steps, for it will be only by incessant toil that you can keep within the rear guard, If you have come from purely selfish motives the interests of humanity demand that you erase your name, for there is no excuse for the existence of a doctor except that he may help lift the curse of disease from stricken humanity.

You have launched your craft on the medical sea. After a four years' cruise through varying seas you hope to safely anchor. The success with which you will make the journey will depend upon the preparation you have made, and upon

the amount of steady, unremitting toil you are willing to bestow. If you have idled away your years of preparation you can be assured of nothing but drudgery and ultimate failure.

You have no doubt lived these four years in the flights of fancy; four years which must prepare you for the tremendous responsibility of taking charge of life's intricate machinery, four years which must equip you to go out and fight the dragon, Disease.

Before entering this important epoch of your life you will do well to pause and consider what are the elements that must determine the final result. To what extent can trained corps of instructors, well equipped laboratories and logically arranged courses of study make for you a successful preparation. How far can you thank or blame your alma mater for your success or failure in the enterprise which you are about to undertake? The answer is it will mainly depend upon yourself. Good doctors were made when medical schools consisted of a forum for the exhibition and display of the brilliancy of the faculty, but which offered about as much assistance in securing a medical education as a course in a theological seminary. The good school is not the school which can make your duties easiest but the school that can cause you to put forth the greatest effort. You may get inspiration from the lecturer but you must get mental power from hard work on text-book recitation or experiment. Your efficient teacher is a pattern, but you cannot take him with you. Your own mental acquirements are a part of yourself and, no power on earth can take them from you. From your point of view you yourself are the principal character in the cat of the drama of life. The mistakes and inefficiencies of others will escape notice, for all eyes are riveted upon you. Every failure is a position lost and sweeps you toward final defeat, Every triumph is a paving stone in your high road to victory. Every recitation missed or made, every examination failed or passed, every

dissection spoiled or completed, every clinic "dut" or attended will contribute its share toward the making of an awkward, incompetent bungler, or a skillful, scientific physician. When you are engaged in the practice of medicine you will never know the day nor the hour when the opportunity will present to establish your fame, but as sure as the night follows the day the supreme moment will come. Your ability to fill the requirements of that moment will spell defeat or victory,—no time then for hours of study and reflection,—no opportunity for experiment and investigation, no chance to retire and consult authorities. The crucial test may be the performance of an operation. Can you then expect to be given time to master the science of anatomy which is the study of a life time?

Your reputation may rest upon a diagnosis. Can you ask your patient to wait until you equip yourself with the knowledge that can only come from years of arduous labor in laboratory and attendance at bedside clinics?

The greatest question for you to solve to-day is, therefore not "how shall I best meet the exigencies of that day four years hence?" but "how can I best fulfil the requirements of to-day?" Your ability to bear the burdens of physician, it is true, is the end in view. But the completeness with which you fill the measure of a medical student is the means to gain the end. The present only is placed in your keeping. In the same measure that you are successful in its guardianship will the future be meted out to you. By the sacred scriptures we are taught that, "To him who hath shall be given. But from him who hath not shall be taken even that which he hath."

"Take no thought of the morrow or of the yesterday," is the advice of one who has reached the highest pinnacle of medical fame in two countries. Not that we may not profit by a realization of the mistakes of the past but that if the "to day" is without fault there will be nothing to regret in the yesterday. Not that we are to plunge heedlessly and unpre-

paredly into the duties of the coming day, but that to-day's duties done are a sure guarantee of the ability to conquer the difficulties of to-morrow.

The world is now witnessing a Titan struggle between two nations. The navy of one, smaller in displacement, has delivered blow on blow upon her more bulky antagonist, until now what was seven months ago a magnificent fleet is only a battered, blistered, and disorganized mass of junk, either lying at the bottom of the Pacific or effectually sealed up where it has no usefulness. The army of one has disembarked under the very guns of her formidable foe and has routed them from position after position, chasing them from their fortifications like rats from their holes, until now the Japanese are the recognized masters of the eastern world. This startling and almost mystifying feat is the result of careful preparation. A few short years ago this wonderful little nation of more wonderful little people learned that God is with the country having the best equipped navies and the most efficient armies. With almost incredible quickness have they garnered from the nations of the world the methods of modern warfare. With tremendous energy they set about to prepare themselves for the mortal conflict they saw impending. And when that supreme test came the little subjects of the Mikado were able to hurl into eternity with the terrible power of lyddite the threatened despoilers of their beloved country.

Not less surely will your victory or defeat in the battle of life be determined by armor and equipment you are now about to put on. Your sword and shield are now to be forged. May they be selected from good steel. They must be heated in the fire of the private study, welded on the anvil of trial by the hammer of the quizmaster, polished and buffed by contact with the wheels of progress, and finally tested by the censors appointed by the commonwealth. But the school is the work-shop in which your sword and shield must be

wrought. It is not a play house in which to amouse yourself and entertain your friends. If we shall succeed in our objects and aims, the college from entrance to attic will be permeated with an air of business. There will be no room within its walls for the noisy disturber, no refuge for the shirk, no comfort for the idler. And for the exact fulfilment of this requirement it is your right to hold the institution accountable.

You have a right to expect the college to enforce discipline. Order is God's first law. A building filled with yells, loafers, and tobacco is no more a fit place for study than a eactus bed is for an afternoon siesta.

And if the purification of the school demands that an unruly member be given his passport home you have a right to demand that it be done, notwithstanding the consequent loss in fees.

It is your privilege to demand of the college that it establish and maintain standars of requirements. You will pay the price in money and in effort for the privilege of practicing the grandest calling on earth, the healing art. You have a right to demhnd protection against the irresponsibile competition of the charlatan, the mountebank and quack.

It is your right to insists that the college stand for the purity of the units that constitute the profession. By example as well as precept we teachers, as exponents of what is ideal, must point continually to the loftier motives and rebuke the tendency to prostitute the profession for gain. And I believe the school should anual the granted right to practice when the recipient not only outrages the primary principles of ethics, but engages in practice criminal, asdesignated by the law of the land.

You can with propriety,ask the callege to evact from you the fulfilment of the work lald down for you. An education on paper would be a poor asset for you. Certificates of attendance and receipts for fees paid will not largely augment your ability for curing pain. A formidable array of diplomas may fill some minds with awe, but the great world will demand

to know what you can do. And the opportunity was never greater for men who can do things. The very air of the medical profession is fairly pregnant with possibilities. Will you consider medical education as a joke and expect to thrive on your capacity for deceiving people into believing you to be that which you are not, or are you awake to the tremendous importance of the passing hour and will you grasp the present opportunities which will never come again? The college will fall short of doing her duty to you if she fails to impress upon you the reality of the occasion.

And after these four years are over, what then? What reward for the sacrifices, what returns for the labor, what will you have to show for the enormous cost of four of the best years of your life and all the pleasure you have been able to accumulate in several more. In other words, what will you get out of the medical profession? That will depend entirely upon your investment. The practice of medicine is the best security you can hold. It is not subject to the attack of bull or bear. As long as people live there will be pain to relieve and disease to subdue. As long as the mad race for gain shall rack men's brains, as long as the wheels of industry shall tear and grind human flesh, as long as the awful engines of war shall wound and maim, so long will the necessity remain for humanity's best friend, the skillful doctor!

An investment of bluff may for a time draw coin from the pockets of those whose powers of discernment do not enable them to distinguish brass from gold, but it will bring only contempt from those whose respect you would most highly prize. An investment of deception may hold the confidence for a time, but exposure is sure to prick the bubble. An investment of sensationalism may present alluring inducements in promise of quick returns. It may dazzle with the elaborate offices filled with expensive furniture. But there are not many minds large enough to solve the trying and perplexing pro-

blems in medicine and shall enough to stand on so limited a foundation. An investment of modesty may not offer sensational dividends. But it is safe. And the investor is in good company, for most really great men are modest. The greatness is a gem that does not require to be labeled. An investment of honesty, morality and conservatism may not put you at once in the line light of popularity, but it will not be in danger of collapse. A cone will stand best upon its base. There are are a few inverted cones in the medical profession.

And now, fellow students, on behalf of the faculty and teachers it gives me great pleasure to welcome you to this, the opening of the 55th session of the Cleveland Homeopathic Medical College. And it is my earnest desire that you may realize that our interests are mutual. The college has no function, in fact no excuse for its existence except in so far as it may be useful to you. If it is to serve you well its affairs must be managed in a strong, and systematic manner. It must have a time and place for everything and must rule with an iron hand in the execution. On the other hand you as a student will serve the college only in proportion to the soundness of your preparation at its hand. The time was when a student was a student as long as he paid his fees. But that time is not now. To day every failure of an alumnus is advertised throughout the land, is known to every prospective student, and will turn a dozen others from our doors, and after it is over, you yourself will be most scathing in your censure for your own inefficiencies. So let us enter a solemn compact for the upbuilding of our common cause.

Let us strike together at our common foes. Let us work hand in hand to make this the greatest year in the glorious history of the institution, and when the last task is finished, may we be able to say together, "Well done!"—*From Cleveland Medical Reporter.*

Repertory of the Mind.

By Dr. B. B. Chatterji of Benares.

(Continued from page 240.)

Angered easily and vehement, Excitable,—from which he afterward suffers. Phos.

Angered; Easily; from it cough and stitches in the chest. Arg-nit;

Angina pectoris; Sudden anxiety, with—also with oppression of the chest, driving him from place to place. Tabacum.

Angina pectoris. Violent attacks of anguish.—Arn.

Angry about trifles Squilla.

Angry about trifles or imaginary things. Mephitis.

Angry at tripces; soon sorry for it. Mezereum.

Angry at trifles, overexcited—; Dissatisfied, Quarrelsome; —Thuya.

Angry every trifle makes him—; Very easily affronted; —Coccu.

Angry; Excited, irritable with inclination to be—: and to scold; anxious and irresolute., Petrol.

Angry; Gets—; at trifles; hateful, vindictive. Natr-Muriat.

Angry. Inclination to scold, without being—; Dulcam.

Angry, Inclined to get excited and—or of a spiteful malicious disposition. Careful zealous persons,—Nux-Vom.

Angry; Inclines to be out of humor and—Vehement. Ledum-Palus.

Angry in suddenly appearing spells. Irascible restless,—Ipec;

Angry, irritability; morosesnes. Sanguina;

Angry. least thing that goes wrong makes her; Irritable, Actea-R;

To be continued.

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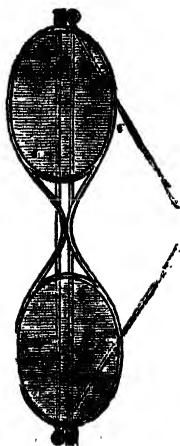
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Pharmaceutist's Manual, L. C., Homeopathic Pharmacopia in Bengali and English: (Second Edition, cloth) Re. 1-4.

Family Prattice in Bengali (3rd Edition thoroughly revised and re-written) 180 pages, cloth, As. 8. A very useful book for family use.

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২৫ নং চৌরঙ্গী রোড—

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মূল্য—৮. আনা মাত্র।

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ওলাউঠা বা কলেরা অতি সাংঘাতিক পীড়া, হোমিওপ্যাথিক ঔষধের চিকিৎসাই ইহার একমাত্র উপায় তাহা বোধহয় সাধারণকে আর বুঝাইতে হইবে না, তবে প্রথম হইতে সীতি-মত ভাবে চিকিৎসার আবশ্যক। সেই জন্য প্রত্যেক গৃহস্থের একখানি কলেরা পুস্তক ও ও কিছু হোমিওপ্যাথিক ঔষধ রাখা কর্তব্য। রোগীর শয্যাপার্শ্বে বসিবা বড় নড় রাশি রাশি পুস্তক হাটুডান অপেক্ষা ইহা হইতে অতি সহজে, অতি শীঘ্র, রোগের লক্ষণ দেখিয়া ঔষধ নির্বাচন করা শ্রেয়ঃ, ইহার ভাষা অতি সরল, মূল্য—১/০ আনা মাত্র।

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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII]

NOVEMBER 15, 1904.

[No. 11.

Founding of a Homeopathic Hospital in Calcutta.

A well equipped homeopathic hospital is absolutely necessary for the town of Calcutta at the present moment. Almost every body knows now that this new system of medicine is quite capable of curing all sorts of diseases even surgical included. Those who are its mortal enemies are compelled to acknowledge the efficacy of minute doses of homeopathically acting remedies.

It is therefore with some degree of confidence that we are led to say that homeopathy can assert its right in the domain of medical practice. We require a hospital for two purposes in this city of palaces. One and the chief aim of it is to give gratuitous help to the poor of this city who have more faith in this kind of treatment ; and the other is to teach Homeopathy as a science of medicine to those who are eager to learn it thoroughly.

We have a few rudimentary Homeopathic medical institutions in Calcutta and there are a goodly number of students who are anxious to learn the new system of

therapeutics. They get theoretical knowledge of it from lectures delivered by well educated and practical homeopathic physicians of Calcutta but bedside knowledge is wanting. The authorities of those medical institutions should combine to devise some means by which these enthusiastic pupils under them can get thorough practical, clinical lessons. We have had the experience of the necessity of a public place where poor patients can get the access and benefit of homeopathic treatment. On one occasion we saw a patient stricken down with cholera left uncared for on the road side. We stopped our carriage and promised to undertake his treatment gratis. But there was no place to keep him and no body ventured to give shelter to a cholera patient, but there was one noble hearted gentleman who gave us the use of an open space in the corner of his house. We took the patient there and treated him. A friend volunteered to watch him and we called several times and glory to Hahnemann's system the patient got cured ultimately.

After this incident we wrote in one of our medical periodicals of the time suggesting the necessity of equipping a Homeopathic Hospital in a humble style. The response was duly given by an elderly physician of our rank but in an adverse way. It was said that he was attacked by another colleague of his when he himself wrote about the necessity of a Homeopathic hospital here.

Long before our time, we are told that a humble Homeopathic hospital was started at Chitpore Road Burtola by the late Dr. Tonnerre and Babu Rajendra Dutt of this city. It had a very short existence.

Now I believe the time is altered and there is a bright prospect before us. A great deal of energy, enthusiasm and a little self sacrifice on our part is required to make it a perfect success. We must know that we are the real custodians of this precious heritage handed down to us by the master and if we neglect to do anything in the furtherance of this cause,

we must be guilty of a serious neglect of duty. If we endeavour with a true and sympathetic heart there is every possibility of a complete success.

We know that our Government would seldom do any thing in helping us in our object but nevertheless we can succeed in our attempt, if we try our best. And it is no glory to us to depend for everything on the Government. In Europe and America the people themselves depend entirely on their own resources in carrying out a noble object of this kind.

We have now had something like an organisation in the fact that our medical schools in this city can do some help in this direction. We now want a site of land for the erection of a building. And suitable hospital premises should engage our attention later on. We cannot expect to get a big plot of land in the heart of the city. That is too expensive. But at the sametime we should not remove our quarters to far away places where very few people would be benifited by its existence.

We searched out such a site with some of our energetic colleagues and friends and we are of opinion that a piece of land not less than two bighas will be necessary and that can be procured in the Upper Circular Road where the value of land is comparatively less. But even that small piece of land would cost us not less than twenty to twentyfive thousand rupees. Next we must think about the buildings. the recent method of building hospitals should be adhered to with all the modern improvements in saintary and and other conditions. Small but detached buildings should be set apart for cholera, plague and other infectious and contagious diseases. Quarters for the resident physicians and surgeons are also necessary.

For all these purposes we believe, a large outlay is to be provided for. We cannot expect to finish these things with fittings and furniture for less than a lac of rupees. Though this appears to be a big sum

still we can get it if we have our heart in the project. In London last year our colleagues there launched a scheme for the proper training of Homeopathy which would cost them about fifty lacs of rupees and we are glad to say that they are nearly successful in their attempt. Let us try our chance this time and with God over head and heart within we shall succeed.

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* A lecture delivered at the Calcutta School of Homeopathy.

times without number. The efficacy of Carbo Veg becomes all the more pronounced particularly where this decomposition turns into gas and the abdomen becomes enormously swollen, and tympanitic. At times it becomes so great that it causes dyspnœa which assimilates impending heart failure due to vasomotor paralysis.

Many a time have I used Carbo Veg in the collapsed state of cholera, where there was great tympanitis, with marked dyspnœa, where there was almost always present that golden keynote of Guërënsy "constant desire to be fanned." In fact I have been so frequently successful with it in the later stages of cholera that with the common human frailty I am inclined to give it a higher place than Arsenic, Verat, Camphor Lach, Cobra and others. Here I must say that my experience has been quite at variance with our late venerable colleague Dr Hughes who says, "I cannot agree with those who see a Carbo adynamia in the collapse of cholera, and recommend it to be given therein. Here I hail the testimony accorded to it by our late illustrious colleague Doctor Sircar who along with Tessier and many others speak very highly of Carbo Vegetabilis. I must further state that it was in true Cholera with all the virulent symptoms and not in cholering that we have used this drug with such admirable results. It was in the case of my own daughter suffering from cholera infantum that Carbo Veg was put to the most severe test. The child was given up as lost when Carbo Veg 30 was given as a last resort on the indications of tympanitis, oppressed breathing, the true Hippocratic appearance, cold and clammy extremities, imperceptible pulse and complete cyanosis.

Lycopod, Verat alb and Carbolic Acid are remedies that have great coincidence with Carbo Veg. Hughes says that the action of Carbolic acid in the gastric sphere is similar to Carbo Veg both chemically and dynamically.

Dr Madden by proving it on his own person came to the conclusion that finely powdered charcoal acts as a mechanical detergent of the mucous membrane, dislodging any superfluous mucus it may have formed and so aiding digestion. Dyspepsia with loose stools reverse of Lycopod. Among the other symptoms enumerated in Hahnemann's Chronic Diseases, the following are some of the most important :—

Fear of ghosts at night, pressure in the eyes ; stitches under the ribs, mucous stools, itching of the anus, varices, too frequent pollutions, too early menses, menses too copious, stoppage of the nose, asthma-dyspepsia, stiffness of the nape of the neck, sweat of the feet, worn out feeling of the limbs in the morning on rising from bed, great drowsiness by day, frequent flushes of transient heat. Besides its use in such algid forms of diseases, it is also used with advantage in the later stages of tubercular scrofulous and malignant diseases that are the results of loss of fluids, in protracted illnesses, in old and debilitated people. It may be administered with decided good results in people who have never fully recovered from the effects of a previous illness.

As regards potencies Dr Hughes recommends the 6th but he also used the 3rd trituration. We use the 30th exclusively but at times have to use the 200th by which also we have derived much benefit. We may with advantage learn much by referring to what Hahnemann says in this respect. "The various degrees of potency are employed according to the varying intention in healing, down from decillion potency to the million powder attenuation, using one, two or three fine pellets moistened therewith as a dose."

J. N. Majumdar. M.D.

The Cause of Appendicitis.

To the *National Review* "F. R. C. S.," who speaks with authority, contributes a particularly interesting article on the cause of appendicitis, and again raises the oft-recurring question : Why is appendicitis so common nowadays ? This affliction spares neither age nor sex, and it is equally dreaded in palace and cottage. It is such an everyday occurrence that we almost wonder, not why our closest friend has been struck down, but when our turn may come.

It may not be, without interest (says "F. R. C. S.") to review some of the known causes of appendicitis and see how they may be avoided. . . . To be forewarned is to be forearmed, and this must be the excuse for discussing it. Some people would still seem to cherish the idea that fruit-stones and pips, of all sizes, from the cherry-stone to the small apple-pip, are liable to enter the cavity of the appendix and there cause dire havoc. As regards the cherry stone, this is pure fiction and the sooner it is disposed of the better. When the reader realises that the entrance of the tube, which has a larger diameter than any other part, will hardly admit in the normal state the top of an uncut cedar pencil, it will readily be seen that even a moderate sized cherry-stone would have some difficulty in passing in. That smaller foreign bodies may gain access to the interior of the tube is undoubtedly true, but the number of instances in which such have actually been discovered within the diseased appendix is comparatively small. A single duck-shot, a small fragment of solder from a canned meat tin, a bristle from a tooth-brush, a spicule from the lining of an enamelled saucepan, and an ordinary pin, have all been known to find their way into the interior of the appendix, and once there such bodies may undoubtedly induce inflammation in the manner subsequently described.

While, then, admitting that in a few cases extraneous matters of the character and size mentioned may play some part in the incidence of appendicitis, we must seek a more common cause for the frequency of the affection. The human body is constantly harbouring micro-organisms which are ever ready to attack the tissues, and are especially capable of doing so when ever the person is below par, or the particular tissue with which they are in contact has suffered some injury. These micro organisms, styled bacteria are constantly taken in with food. There is perhaps nothing which so tends to assist their multiplication and to increase their virulence as hurried and irregular meals involving the retention of imperfectly digested food. Then it is that these microscopical organisms will crowd into what may be called the backwater of the appendix, here to stagnate and to develop a powerful poison, which, acting upon the walls of the tube, soon produce danmacm, which is evidenced by pain and all the train of symptoms incident to appendicitis. Take a day in the life of the ordinary City man, who, having risen somewhat later than usual, finds it necessary to hurry his breakfast, perhaps even to run part of the way to the station in order to catch the train which will enable him to keep an important appointment. He is busy throughout the morning, and finds that to get through his work and enable him to leave his office at a respectable hour in the afternoon, lunch must be a scramble, though he is unwilling to forego his usual full complement of diverse food. On reaching home he is too tired to enjoy any healthy exercise, and a third meal—*i. e.* dinner—follows upon the two previous badly digested meals he has already taken, with the result, that the inevitable evil consequences follow. He may keep up this unwholesome rush for a while, but before long he will feel the necessity for a holiday. Off he goes and perhaps opens the ball with a tough round of golf, or possible a

series of hard sets at lawn tennis, or, may be, even a day's sculling. Then he is suddenly attacked with appendicitis, and placed in considerable danger.

The moral is to eat one's meals deliberately, leaving time for the commencement of the process of digestion before imposing undue strain on the muscles by rushing to the station or the mental faculties by any intellectual effort such as a smart financial transaction. . . . It will thus be realised that the medical profession looks upon the modern life of rush, strain and worry, with unwholesome diet and irregular habits, as one of the principal causes of the increase of appendicitis, and it believes that those who wish to avoid this ailment must live more plainly, take matters more easily, and pay greater attention to what nature proclaims as a rational existence. Remember that one attack of appendicitis is liable to be followed by another at an unknown interval and the survivor of the first may succumb to the second. As has been suggested, much can be done to avoid the onset of the attack, and possibly even if it has come to a head, care in diet, regularity of exercise, and an intelligent, well-ordered life may serve to postpone or even prevent a second prostration.

Sulphur, Calcareo, and Lycopodium.

There are so many people who at one time or another need one, or perchance all three of these remedies, that cases which point to them are always of interest, not because of their difficulty, but because of their great importance as reminder. We take pleasure in reporting the following cases sent us by one of our contributors.

Miss. H., aged fourteen, had been very poorly

for over three years ; had recurrent attacks of tonsillitis ; was unnaturally fleshy and the glands of her neck were swollen, while from one of them there was a chronic, whitish, milky discharge.

Her ankles were weak, so weak that she was unable to go to school : there also was a tendency to weakness and dislocation of the joints so that she wore braces.

There was burning of the soles at night.

She had often been troubled with profuse sweat, especially of the head.

After vaccination in child-hood she had large pimples every month which would leave large cicatrices behind them.

When cutting her teeth, she had convulsions, < when she cut the teeth on the left side.

When four months old she had pneumonia, from which she never fully recovered, and has had more or less catarrh ever since she can remember. I thought I saw a Sulphur case, but as Sulphur did not seem to help as much as I hoped it would, I gave her Silicea ; still the improvement was but slow I then gave Calcarea, after which the improvement was very marked. Her ankles were stronger, so much so that she was able to remove the braces and began to be more ambitious. But still some troublesome symptoms remained, so I next gave her Calcarea, and the improvement though slow was real.

Further details of the case are given, but not seeming to converge at all clearly on the remedies that were used, and the improvement being slow, we do not take time to report them, but should like instead to add a word of comment, to the effect that in all probability the next remedy after Calcarea should have been Lycopodium.

We do not believe in routine prescribing, nor in giving any remedy on a single indication ; but clinical experience has often shown that Lycopodium is need-

ed to complete the cure in some Sulphur-Calcareo cases, and the doctor would have found many Lycopodium symptoms if the case had been retaken more fully at this point; even the incomplete picture given would strongly suggest Lycopodium as one of the constitutional remedies, especially if the sequence of these remedies pointed out by Hahnemann and verified by Hering and others had been studied.

But neither Hahnemann, Boringhouse, Hering nor Lippe find anything of the wonderful clinical possibilities of Tuberculinum. Cures of obstinate chronic patients were then zig-zagged by Sulphur, Calcareo and Lycopodium guided by their sequential relation, which are now effected by the direct action of Tuberculinum, selected largely upon the symptom totality of constitutional diathesis. Sulphur, dividual symptom picture, but Tuberculinum was the *similinum de novo*. When we remember that pneumonia in child hood must always be considered an acute out burst of the chronic tubercular diathesis caused by exposure to some exciting cause, we can easily see why she never recovered from the illness when four months old Tuberculinum then would not only have relieved the acute attacks but so changed her constitutional diathesis that subsequent suffering would have been avoided. It would have cured her.—Medical Advance.

The Mental Element In Fatigue.

That a person apparently prostrated by fatigue may still exert powerful strength when a proper appeal is made to his mind or to his emotions, is well known. That this is due, not to the addition of energy from mental inhibition that has prevented him from using his originalism, is asserted in an article in *Cosmos* on

"The Psychology of Fatigue." The writer believes that the tired man, at least in the early stages of his fatigue, is so, simply because he believes himself to be so; and he adduces numerous interesting facts in support of his view. He says :

Fatigue is a complex phenomenon ; its most apparent manifestation is the gradual diminution of functional power—the difficulty of continuing work that has been begun. But there is in fatigue a considerable psychic element. The physical phenomena that are the consequence of prolonged labour give to the mind the auto-suggestion of the impossibility of acting, considerably before this impossibility really supervenes. M. Dubois, of Berne, has with justice dwelt on this fact. He says : "Soldiers are on the march ; they have traversed a long road. They can go no farther and lie down by the roadside, declaring that they are incapable of going another step. Let an officer appear, who knows how to raise the *morale* of his troops, and let him order the band to play, and you will see these men take up their march almost at a quick-step. Were these men worn out ? No ; for in that case it would have been necessary to give them rest or food, or to leave them where they might be picked up by the ambulance. They were tired ; but under the influence of fatigue their *morale* had weakened, and they viewed their fatigue through the magnifying-glass of their pessimism. The word of their chief, the music, put new life into them, enabling them to resume their march. The knowledge of imminent danger, or of the presence of an enemy, would have acted in the same way and given the use of their legs." He adds : "I do not wish to assert that an action on the senses can have no direct influence on the muscular force ; various physiological experiments seem to show that it may. But I refuse to recognize any so-called 'dynamogenic' action in the facts here detailed. Encouragement creates no force ; it can only set free pre-existent energies.

Rest and food alone can restore to an organ the strength that it lacks, the former enabling the cell to eliminate its toxins and the latter carrying to it nutritive material. A psychic excitant acts in another way on the elements of the thinking brain, which are much more delicate and mobile. It dissipates sad humors and what we call fatigue. Finally just as the conviction of powerlessness makes one powerless, strength may return again with the feeling that one possesses it.

M. Tissie in his interesting work on "Fatigue and Physical Training," cites several examples of this psychic influence: "During the bicycle race from Paris to Brest and return, Terront, overcome by sleep after 66 hours on the road and three nights without rest, fell by the way. He had no wish to go on, but his brother urged him to do so. He was replaced on his machine and after moving along hesitatingly for a few minutes he started off in excellent form and won the race in a brilliant finish. After his ride of 1,000 kilometers "621 miles which has lasted 42 hours, the same rider. . . . affirmed that he could do 100 kilometers more, if they would place him again in the saddle. Victory does not belong always to the army that can boast of the fewest casualties, but to that which knows how to resist psychically and to advance at the proper moment."

Examples are numerous: "A battle lost," said Suvaroff to Joseph Le Maistre, "is a battle that is believed to be lost." "There are in war," said Prince Frederick Charles after Rezonville, in 1870, "other factors besides those of tactics or strategy, namely, those of moral superiority, and there are cases where we should rely on the latter in the face of the former," "European States," wrote M. F. Reglault, "accumulate formidable engines of war; fortresses, cannon, guns—all are of the last degree of perfection. The number of combatants is immense: it is a nation in arms. But is any thought taken for the moral factor? Evid-

ently not. And nevertheless this moral factor is the whole thing with millions of people suddenly torn from their firesides and filled with fear. Formidable masses without cohesion—a terrible instrument that no hand knew how to wield. The moral element is the king of battles.” Above the muscular act stands a psychic act, conscious and superior.—*Statesman*.

Clinical Cases.

While attending a case of fever, I was requested to see a young lady who was suffering from hemorrhage of the uterus, which had gone on for three days in spite of the efforts of a local allopath who had tried all sorts of hemostatics in vain. The most serious and wonderful part of the thing was that the attending physician had promised to cure the patient in two days without even caring to enquire into the history of the case fully.

In asking about the nature of the flow, I was told it was partly clotted, partly fluid and was slightly offensive. She was a young lady about 20 years old, mother of a living child, healthy 2 years old. Her menses have been generally healthy and regular *but she had not menstruated for four months previous to this flooding*.

She complained of occasional bearing down pains. But as yet the lady showed no signs of exhaustion. She was going about, doing the daily duties of the household. I examined her and found the uterus hard and painful on pressure. The nature of the pain and the intermittent character of the flow led me to suspect it to be a case of abortions and I told the patient's husband plainly about it, and further requested that the patient should be put to bed and not allowed to move about. Sabina 30. Four doses every three hours.

The next morning I was informed that the hemor-

rhage had continued unabated during the night and that she had passed a clot as big as a hen's egg. Further she had become very weak. When I visited the patient I found her very weak and feeble, her pulse small and frequent and her temperature 97. The blood was bright red in character mixed with shreds and clots. The pain continued as before. Erigeron 3x every three hours.

In the evening, I was summoned in haste. I found her very restless, tossing about in bed, the temperature rose up to 103. She was very thirsty and had an alarmed look, the flow continuing the same as before. She had passed another clot of the same size as before. Acon 3x. The next morning no improvement was perceptible, moreover the pulse had become very irregular although the temperature had continued 104 all through the night. Lachesis 30, every 2 hours.

In the evening I visited the patient again and found her in a worse condition. She was becoming very weak, her pulse in the same state, the temperature continued as high as before, moreover the discharge had become offensive. Pyrogen 6x three times that night.

The next morning I found a marked change in the patient's condition and my conviction that Pyrogen timely administered could surely mitigate the ravages of septicimia was verified once again. I wish to say a few words as to the accessory measures adopted in this case. Wood and others are of opinion that the uterus should be douched frequently and that if any of the membranes are left behind, the flow will continue until the curette has been applied. It is my firm conviction that it is seldom necessary to wash the uterus unless the discharge appear to be offensive and that curetting is never necessary if the patient receives proper homeopathic treatment from the beginning. In this case I advised clean linen bedclothes &c but I did not resort to the douching until the discharges

became offensive, although I had the parts washed with tepid water every day.

Epistaxis-Erigeron. I was called to see a case of epistaxis early in the morning of the 10th October. The patient a young man aged 20 years, had an injury in the nose caused by an iron nail accidentally struck into the nose. The patient had been subject to nose bleed before. After the injury he bled slightly but the next day the hemorrhage stopped and the patient kept well for several days. One night while fast asleep he began to bleed profusely, so much so that he did not know anything about it till the pillow and the bed sheet were soaking wet. A local Allopathic physician was called, who used all sorts of hemostatics but in vain. The hemorrhage would stop and then begin again with real force.

I visited the patient on the 4th day of hemorrhage. The patient was thoroughly exsanguinated, and was very pale. His pulse was very weak and he complained of a ringing in the head in sitting up. Arnica 3x (internally) three times a day. Arnica + lotion to be used when the bleeding would become profuse.

In the evening I had the report that the patient was better. Had no more bleeding during the whole day. Stopped the medicine.

The next morning I learnt that the hemorrhage had appeared again and large quantities of blood came out. I visited the patient again and found that about 10 to 12 ounces of blood had come out during the whole night. China 30 three times that day. No improvement. The bleeding the same as before.

Erigeron 3x every three hours the whole day the next day. No more hemorrhage from that up to date.

He has been to me two three times after that for an occasional dry cold that he suffers from and which has been cured by Bryonia 12x in repeated doses.

J. N. Majumdar M. D.

Calcareia Carb.

Some cases of great disturbance of the health following the ingestion of pure carbonate of lime, in persons who were manifestly suffering from morbid acidity in the stomach, induced me to institute experiments with it in a dissolved state; and I found it possessed of great medicinal power, so said Hahnemann. The carbonate of lime is not chalk or marble as it is generally supposed but is the pure white substance that is found in the inner layer of the oyster shell and that is the substance that we use for homeopathic purposes. The first few potencies are generally prepared in the triturated form. That calcarea has become a deep acting remedy of inestimable value in various diseases is an well established fact. That it has undecided power in helping the formation and growth of bony tissue in rickety and scorbutic punie little children is a fact that has been corroborated mahy a time. We have repeatedly seen calcarea to be able to irradiate many diseases which had their basis in scrofula or tuberculosis.

Calcareia carb is a Hahnemannian autipsoric of great value. Its principle sphere of action may be said to be in the vegetative sphere, impaired nutrition being the chief indication every where namely in the glands the skin and the bones. In Hahnemann's Chronic Diseases nearly twelve hundred symtoms appear all observed on patients using the 3x to the 12x trituration. Hahnemann in his later years made a few experiments with the 30 on himself and others.

Although our friends of the other school emphatically declare that calcarious substances introduced and taken into the human body are useless and power less yet they do not hesitate to use it in combination with milk in the shape of deal water for young children, in pregnant women, in debilitated rachitic persons who suffer from a supposed deficiency of lime.

Hahnemann says calcaria does much good in epilepsy, it is also indicated in cases of women who suffer from early and copious menstruation.

It is useful in patients who are very susceptible to cold and who generally suffer from damp and cold feet.

The patient becomes worse after bathing or working in water. Generally speaking it is useful in rachitis, difficult dentition, imperfect ossification; delay of the power of walking; for scrofula, adenitis, mesenteric diseases, chronic diarrhoea and gastric disorders; also in various cutaneous eruptions.

Jottings from the Journals.

The doctor—The prescription is mightier than the sword.

A physician's wealth may be called ill-gotten gains.

His diploma is a license to collect pay for running a guessing contest.

Why will they keep on finding new germs? None of the rest of us are advertising rewards for lost germs.

When the legislature really wants to do something sensible, it should make it legal for us to pay our doctor's bills by returning their calls.

A physician making out a prescription for himself may be said to be writing an autobiography—at any rate, he is at work on his own life.

Don't contradict your family physician when he tells you that you cannot live till morning. Man, man don't you suppose he knows what he gave you?

When a doctor's medicine can successfully compete with a circus parade in pulling a boy out of a sick bed, he is no longer a physician he's a magician.

The old doctor can readily be distinguished from the young doctor, even in the darkest night, by asking him a question. The old doctor is not so overwhel-

mingly, rambunctiously sure about everything.—Tom P. Morgan (Puck).

Pharmacodynamics and Therapeutics.

Materia Medica Items.—Remember the *Mephitis* patient delight in extreme cold. It is a pleasure for them to bathe in ice cold water. Lots of drugs have relief from cold, but the *Mephitis* patients want icecold.

When your patient imagines :—

She is double don't rush after *Baptisia* symptoms. It is, of course well to think of *Baptisia* owning that symptom, but *Stramonium* owns it, *Thuja* claims it, and *Petroleum* says it is mine.

Headache with blindness, is a prominent symptom found in *Kali bichromicum*, *Iris versicolor*, *Gelsemium*, *Natrum muriaticum*, *Causticum*, *Psorinum* and *Silicia*.

An occipital headache.

Is hard to cure but we have *Cocculus*, *Gelsemium*, *Juglans*, *Pretroleum*, *Bryonia*, and *Cimicifuga* to lend curative hand when indicated.

Professor Dewey says : "*Hellerborus* was used 1400 years before Christ. (The Professor is still in his prime).

When a headache is relieved by urinating *Sanguinaria*, *Ignatia*, *Gelsemium* and *Silicia* are recalled to my mind.

The *Natrum sulphuricum* patient.

Is always worse in damp weather, but the *Causticum* patient finds relief from all his complaints in damp weather.

Dr Hering once said :

The "physician who takes no note of his cases resembles the artist who professes to draw from recollection," but Dr. Guereux went further and said :

"The physician who does not record the symptoms of his cases is like a sea captain starting across the ocean without a compass to steer by."

Hahnemann recommends Ammonium carbonicum.

In nosebleed occurring every morning on washing the face. I have often seen epistaxis appear under the above conditions, with frequent recurrences throughout the day, cured with Phosphorus 30th. They were Phosphorus patients, though they were worse blowing the nose or in stooping. When the patient is awakened at night with epistaxis Rhus toxicodendron is usually the indicated remedy. Process has cured chronic epistaxis occurring at regular intervals each week or month, exhausting the patient to a profound condition. Such patients may be called "regular bleeders" (Luther Peck, Mr. D.)

Of late a number of allopathic druggists have been preparing and peddling "homeopathic medicines" of their own make. Homeopathic Physicians should not patronize this as they were the first to persecute Hahnemann and the early homeopaths and such stuff as they sell.

This is a fact and ought to be taken notice of by the profession.

Spiritus glandium quercus is the distilled spirits of acorns and not the tincture of acorns as is supplied by some Pharmacists. The late Dr. J. Compton Burnett got the idea for its use from Rademacher and introduced it to the world in his excellent little book on gout.

Lupulin in sexual weakness.—The July number of the Homeopathic Recorder contains a short paper by Dr. Schlegel on the use *Lupulin* in "Sexual Weakness and pollutions", spermaterrhoea, impotence, etc, *Lupulin* is a tincture of hops, and in the first decimal is singularly efficacious, it is claimed, in the above named complaints. Dr. Jhossa extols it in the above named complaints, and also in painful erections in cases of gonorrhoea.

Hippocrates.

HIPPOCRATES, the Father of Medicine, was born in the isle of Cos in the year 460 B. C. Very little is known of his private history, his very existence having even been denied by ignorant sophists. Plato, *his contemporary* states, however that he was "the sworn enemy of *charlatans* and of ostentatious display." He came from a family of kings and physicians, among whom were Prodicus of Cos, Hippocrates I., his grandfather, and Heraclites, his father, who taught him the elements of science. He traveled extensively, acquiring and disseminating knowledge, unselfishly practising his profession. The first illustrious patient mentioned by his early biographers, among them Soranus, was Perdiccas II., King of Macedonia, "whom he cured from an incurable disease—love-sickness."

His medical genius came to light during a terrific epidemic of the *black plague*, which he brought to an end *particularly* through radical hygienic measures; he burned everything which had come in contact with the patients.

Hippocrates had many disciples, whose writings are wrongly attributed to him. His authentic works may be divided in two parts: 1, Description of diseases; 2, Researches of their causes. Everything is to be admired in these works, in which he has firmly established the "Method of Observation." He simply reached the truth through intuition, anatomy and physiology being unknown to him. His main title to fame is to be found in these words, in which he resumed the true philosophy of medical science: "We must extract the rules of practical medicine, not from the sequelæ of consequences, no matter how probable, but from experience directed by reasoning." Modern medicine is yet progressing on these lines.

• In all his writings Hippocrates takes great care to enhance the dignity and the sacredness of the pro-

fession ; his *oath* is yet the best code of ethics ever devised. The Greeks thought so much of his grateness that they attributed to him a divine origin, assigning Esculapius and Hercules as his ancestors. Hence the marvelous stories related about him. He never refused his services to any one except to Artaxerxes, whose seductive presents he declined on the ground of patriotism. He died at Larissa, Thessalia, it is supposed, in the year 380 B. C. His contemporaries erected to his memory an iron statue, on the pedestal of which was written : "Hippocrates, our Saviour and Benefactor." To this, Posterity has added the title of "*Father of Medicine*."

Editorial Notes.

The winter this year has been marked by absence of cold weather, hence there is a good deal of sickness about. Cough and cold is the general complaint, a few cases of cholera have also been seen in places. Dengue fever with its roseolar eruptions has also made its appearance. The disease though not fatal is still very painful.

We have great pleasure in announcing that our colleague Dr D. N. Ray is busy preparing a new edition of his book on Cholera. The book it is said has been so thoroughly revised that it will be almost a new book. With the doctors vast experience in this disease we daresay it will be a very valuable book.

Many friends of Dr. L. Salzer will be pleased to learn that our illustrious colleague is now in Calcutta staying at No 3. Chowringhee. We expect to have a short sketch on the life of Dr Salzer with a portrait for the January number of our journal and we are sure that it

will be most appreciated by our readers here and abroad. Dr. Salzer stands foremost among the pioneers of Homeopathy in India.

Dr. P. C. Majumdar's book on *Materia Medica* is now going through the press for a new edition which is being extensively revised and enlarged.

Obituary .

Robert Ellis Dudgeon.

By the death of Dr. Robert Ellis Dudgeon England has lost one of its most distinguished homeopathic physicians. The British profession seems to be very unfortunate in losing so many of the pioneers of homeopathy one after the other within a very short space of time. Drs. Hughes, Burnett, and Dudgeon were all hard workers for the cause of homeopathy in England and the British homeopathic physicians owe not a little to these gentlemen for the privileges they enjoy today in England.

Our first acquaintance with Dr. Dudgeon was through reading his translations of Hahnemann's writings and since then we have always had a very high opinion of Dr. Dudgeon's ability. It was in the year of the World's Congress of Homeopathic Physicians held in Chicago, while sojourning in England, that this acquaintance became an ardent admiration and friendship. Dr. Dudgeon's kindly advice and the hospitality that was extended to us, would always be a grateful remembrance to us. In the next issue will be found an autobiography of Dr. Dudgeon that we venture to say, will be read with great interest by our subscribers.

Why am I a Homeopath,

The following is a paper read in one of the regular meetings of the Alpha Sigma, at the 'Jota' chapter house, Chicago. "by S. N. Goswami, an Indian student now studying in the Hering Medical College."

Dear doctor—The explanations that are perhaps ample to justify our actions to our own minds are not always sufficient to justify them to others, be they ever so reasonable. Yet I will attempt to eradicate the source of your one continual curiosity, that is, 'why I am a homoeopath.'

Perhaps it will not please you, but I hope it will appeal to your reasons, when you know why I am a homeopoth and not an allopath.

I would not have brought this question as the subject of my letter today but I know you will not take it, in the least, as personal; and I think perhaps it will serve to settle our daily disputes and enable us to understand each-other better.

I have a difficult task to perform, when I have to convince an antagonistic mind, as yours, of my reasons for standing up for what you call 'a fad'; I might get off the task here by simply saying this—'because I am, ;—but no, I will try to show you to-day the firm ground on which I stand, if you will only wipe the prejudice off your eyes and see.

We all start in, whatever path our inclinations may lead us into, with certain preconceived ideas, which as we go along and meet things as they are in reality, either change into something else or become confirmed into proven truths. It is this preconcieved idea, about the practice of medicine that started us both, with our common object in view ie to cure the sick: you with your antagonistic disease curing methods as your aid in the mission—and me with the law of similars as mine. We each think the other's theory wrong, and

both know that neither is universally true ; for all the sicknesses that the Almighty has doomed humanity to suffer from, do not come under the pale of any means known to man. Indeed we do not claim to cure all ; but how much do we cure and how simply we do it, there is where it differs from what you do, and this is what I want you to see. But do not justify your action by pointing to what we do not cure, for I have just said we do not cure all, neither do we claim to do so ; but how much more do we cure than you do ; for indeed the number of those that you do not cure far exceeds that of the ones you really do—nay even taking the cases, that get well of themselves, notwithstanding the obstacles you throw in the path of nature in her healing process, in the shape of your heroic drugs, and the ones that you suppress and keep on suppressing by your ever accelerating doses, into consideration. And these you do not call cures ?

The action of a selected homeopathic remedy is nothing but cure, in cases that are curable ; and it is this action, not the temporary palliation or suppression that adds credit to our creed. Doubtless palliations and suppressions have their respective use when they help the sick and nothing else does. But why should we fraud the suffering humanity with such patchwork when work better than that lies in our reach ? If more palliation is needed I will go where I can find it and apply it to relieve the sufferer, not stopping to see where I can find it and apply it to relieve the sufferer, not stopping to see where I get it from—for my mission is to relieve the sick and not sectarianism. The strongest arm and the most simple one, I find to help me in my mission is in homeopathy and this is why my faith is in homeopathy and I assure you it shall ever remain there.

“Fraternally yours”

Chicago. Nov. 3rd. 04.

S. G.

Clinical Medicine.

Ipecatuanka in dysentery.—In this season ie in October and November there were a large number of cases of dysentery in Calcutta and its neighbourhood.

These were mostly painless cases with bloody stools, blood pure mixed with shaggy and greenish mucus, tenesmus was present but not to a degree that requires *Mercurius*. The stools were often mixed with some fecal matter. There had been nausea and in some cases even vomiting but not very characteristic. In many cases these latter symptoms, so characteristic of *Ipecac* were conspicuous by their absence.

We had been very successful with this remedy alone (*Ipecac*) in high potencies during this period. It was almost the *genus epidemicus* for this season.

Notes

Neglect of Homeopathy by our Government—In this country homeopathy is not at all recognised by our state. This is plain enough, as our Government is guided by the allopathic medical men and their authority is supreme, every body knows in what light the new system of medicine is received by the orthodox class.

A gentleman had been suffering from hemicrania for a length of time and two of the best allopathic physicians of this city were consulted. They treated him for two months without any benefit whatever; on the contrary the gentleman lost his strength. He was attached to the High Court as a clerk. During the treatment under allopathic doctors he got his sick leave for that period. But when under Homeopathic treatment he was denied that favor. With great difficulty he got leave for two weeks and during that time he was perfectly cured.

Cremation is gaining favor every where. It has been in existence for an indefinite period among the Hindu population of this country. It is growing in favor in Germany, Italy, France and even in England. We are told American people favor it most.

In Calcutta we have several burning ghats where only Hindu population is cremated, people of other denominations need a separate crematorium. We are glad to notice that our municipal authorities are doing their best to establish a crematorium for other people in this city.

Remuneration in Medicine :—“Dr. N. S. Davis, who died in Chicago in June, was one of the leading practitioners of the old school ; he was an advocate for higher medical education and was known as the ‘Father of the American Medical Association.’ After an active professional career of more than sixty-seven years it is sad to record that his life’s work has yielded an estate valued at but 29,000” dollars.

[And yet this is far above the average. Statistics of business and professional men in America, for the last fifty years show that only five or six in every hundred secure a competence ; that 95 percent die insolvent. And while an estate of 29,000 is small compared with the millionaires on the right and left, still he is one of the few who leaves anything. The professional men to make money rapidly and get rich quickly often leads to investments that are not secure, or speculations that are generally misleading and unfortunate. Editor Medical advance.]

Appendicitis, and Typhoid :—Dr Joseph Price, in the American Journal of Obstetrics, tells us that some years ago he pointed out the fact that cases of appendicitis were quite often treated as typhoid, but that now he is almost sorry that he did it, since a great many cases of typhoid are being

rashly operated upon as if they were appendicitis. [This is a legitimate illustration of the folly of treating the diagnosis and ignoring the dynamic derangements of the patient. The eradicating of the symptoms by strict homeopathic treatment would leave behind neither appendicitis nor typhoid. E D.]

A Brave Surgeon :—Dr. C. E. Fisher recently performed the unusual feat of operating upon himself for blood poisoning. For nearly a week he had been suffering from a violent infection of the left foot and it became alarming. Being near Washington, he arranged to go there for surgical operation, but was prevented by an accident. Seeing that delay was becoming dangerous, and that he was in a fair way to lose his foot and perhaps his life, the infection extending rapidly as far as the knee, with the assistance of his hospital nurse he operated upon himself, cutting from the instep to the toes down to the bone, without an anesthetic, scraping and gauging among the diseased tissues for nearly half an hour.

Reports from the hospital state that he is better now than for a week, and by the promptness and thoroughness of his self-operating is in a fair way to save not only his leg and foot, but his life.—Baltimore American.

Repertory of the Mind,

By Dr. B. B. Chatterjee of Benares.

Continued from page 252.

Angry mood ; Quarrelsome. Ranuncu-Bulb ;

Angry ; Peevish, irritable, easily offended Capsicum.

Angry, Vehement, headstrong. Lycopo ;

Anguish about the heart, even to suicide. Puls.

Anguish accompanied by great oppression ; better in open air.
Canab-Indi ;

Anguish and sweat all over, at night—Ambra ;

Anguish, Great coming from the precordial gion, driving him from place to place ; palpitation. Arume.

Anguish ; Great ; wild with anxiety. Secale-Cor .

Anguish ; Much ; She feels as if she would lose her senses and die soon. Platinn.

Anguish Trembling,—and fear, as if some accident would happen all day relieved after going to bed. Magan-Carb.

Anguish, Tremulous—; as if death was near. Puls ;

Anguish. Violent attacks of —; Angina pectoris. Arn.

Anguish with great—and fear of death. After anger, alternate laughing and weeping—; Piatina.

Anguish, with—; Melancholy : silent ; during puberty ;—Hell ; Angular disposition. Rough—; Tellurium.

Animal were in abdomen, as if a living—; Fixed ideas ; as if a strange person was at his side ; as if soul and body were separated as if made of glass ;—Thuja.

Animals are jumping side ways out of ground, or running at him Hallucinations, which terrify the patient ; sees ghosts, hears voices back of his ear ; sees strangers or imagines—; Stramonium.

Animals. Dread of dogs and other—; at night. Cinchona ;

Animals lying near her which she fears she may hurt imagines.—; Erroneous ideas ; thinks she is some one else, moves to edge of bed to make room ;—; Typhoid fever. Valeriana.

Animals ; sees—; affrighted expression of face. Mania-a-potu : with dullness of the senses and at intervals sopor, with snoring ; in old emaciated person ;—Opium.

Annihilated. Imbecility of will, as though—; Opiume.

Annoyance. Indifferent or low-spirited after the least—; Kalibichro ;

Another, changes from one work to—; from one room to ; without keeping to any object. Idles through the afternoon, does not really get at work ;—Borax.

Another, frequently jumping from one subject to—Mania with great loquacity—; Lachesis ;

Another. Passes quickly from one subject to—; Valeriana.

Another person lies alongside of him or that one limb is double. thinks—; Delirium ; Petrol ;

Another, Says one thing for—; when speaking. Cannab—Sat ;

Another ; Sudden to transition from one fantasia, when completed to—the general character may remain unchanged ; after visions of great sublimity usually follow visions of a quiet relaxing and recreating nature. Connab-Ind ;

Another thing. Asks for one or—; rejecting it when proffered. Dulc ;

Another timid, at one time confident at—; Variable mood—; Alumina.

Another wants now one thing, then ;—walks hither and thither. Unsteady and fickle, cannot persevere in anything ;—Asafatida.

Another. Wants to go from one bed to—; Fyos ;

Another. Wants to go from one bed to—; Cannot find rest anywhere, changes place continually—; Ars-alb ;

Answering. falls asleep while being spoken to or—; Bapti.

Answering questions, declines—; dislikes sympathy. She does not speak a word—; Arn ;

Answering Reluctant—; Mancinella.

Answering, slow in—; Diminished power of mind over body ; can not fix ideas—; stares unintelligently ; muscles do not act properly if the will is not strongly fixed upon their action ; as when spoken to, the attention being thereby diverted, she drops things. Hejl ;

Answering them. Repeats all questions before—; Tinc ;

Answer, disinclined to talk, to—; to see friends. Depressed, joyless ;—Colocy ;

Answer questions. Disinclined to—Agar ;

Answer questions. Sings talks, but does not—; Agar ;

Answer ; Unwilling to—; says yes or no with difficulty ; pulse very small and frequent Sulph-ac ;

Answer. unwilling to speak a word or to—; Taciturn, —; Lactus-granni ;

Answer ; would not—; at other times very loquacious ;

Answers correctly but slowly. Incoherent talking ; answers hastily or reluctantly, thought seems difficult ;—; Rhaz-tox ;

Answers correctly, when spoken to—; but unconsciousness and delirium at once return, unconscious—; Arn ;

Answers either reluctantly and slowly, or short and incorrectly. Phos-acid ;

Answers gives—; wholly irrelevant to the question put to him. Nux-mos ;

Answers hastily or reluctantly, Incoherent talking ;—thought seems difficult ; answers correctly but slowly. Rhus-tox ;

Answers. Intellect benumbed, though he gives correct—; Col-chicum.

Answers. Makes irrelevant—; Hyos

Answers no questions. Hyos ;

Answers no questions or replies wrongly. Great indifference ;—Phos ;

Answers property but immediately stupor returns. Stupor, Unconsciousness ; does not reply to questions ; does not recognize any one. Hyos ;

Answers questions hurriedly and evasively. Actea R.

Answers short. Cicuta ;

Answers unwillingly and shortly. Sullen,—; Stann ;

Anxiety-Aloe Soc.

Anxiety about his disease, with fear of death ; fear of cholera. Nitric-ac ;

Anxiety about his soul's salvation ; indifference about the lot of others. Meeancholy mood ; dwelling on religious or philosophical speculations ;—; Sulph ;

Anxiety about real or imaginary evils. with fear ; flushes of heat over the face ; Sepia.

Anxiety : allowing no rest at any employment ; as if she had committed a crime. Chelido ;

Anxiety and feeling of dread. Anxiety precedes vomiting and delirium. Sangunar ;

Anxiety and restless change of place ; ebullitions, sweat ; apprehensive ; imaginary fears ; fears he will lose his mind ; worse evening and night ; wants to go abroad ; tries to flee from the house. Merc ;

Anxiety and restlessness, afterwards headache and colic. *Aethusa-Cyna*.

Anxiety : apprehensive, after an emission. *Carbō-ani* ;
Anxiety, as after committing an evil deed, worse evening and after dinner. *Vera-alb* ;

Anxiety better from weeping. *Melancholy* ;—; *Tabacum*.

Anxiety. Continued restlessness and—; *Stann* ;

Anxiety.defecijon :—; Weeping mood :—; *Actea—R*.

Anxiety, excessively affected by sad stories. *Cicuta-Vir* ;

Anxiety—Fear and—; about maginary coils. *Lauroce* ;

Anxiety; fear,—; coldness : fainting ; involuntry diarrhoea. After fright :—; *Vera-alb* ;

Anxiety, Feeling of—; as though some personal misfortune would befall him. *Croton* ;

Anxiety following a some what cheerful, careless mood. Depression of spirits ;—; *Gels* ;

Anxiety. frequent attacks of—; Impulsive, must walk fast ;—; *Arg nit* ;

Anxiety. From giving directions in her domestic affairs, great palpitation of the heart and—; *Stann*,

Anxiety, full of fears, of evil forebodings. *Psorinum*.

Anxiety. Great—; *Causticum* ; *Graphites*.

Anxiety ; Great—; also in meningitis. *Hypericum*.

Anxiety—Great—; and palpitation of heart. *Calc-Carb*,

Anxiety—Great—: and sleepiness ; anxiety increased until 11 P.M. *Borax*.

Anxiety—Great—; in the evening. *Hepar*.

Anxiety—Great—; of mind, with fear of death. *Squilla*.

Anxiety ; Great—; restlessness. *Ailanthus-Gland* ;

Anxiety, Great sadness and—; worse in morning on awaking. *Lachesis*.

Anxiety, Great—; with constriction of chest and dyspnoea. *Ars* ;

Anxiety ; grieves about his sickness and about his children. *Acc-tic ac* ;

Anxiety, hopeless, all night. *Lithum Carb* ;

Anxiety. Hurriedness, with—; *Natr Muria* ;

Anxiety. Hypochondriacal—; *Aru* ;

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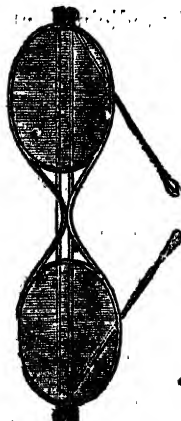
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শিশি, কর্ক, সুগার অফ মিক, গ্লোবি-
উল, ইত্যাদিও গুলতে দিয়া থাকি।

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ডাক্তার শ্রীযুক্ত প্রতাপচন্দ্র মজুমদার মহাশয়ের কৃত,

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ঔষধশুণ সংগ্রহ (চতুর্থ সংস্করণ)	৫০
চিকিৎসা তত্ত্ব (সংস্করণ)	২১০
রক্তমাশয় চিকিৎসা (ডাঃ বেল সাহেবের হু ও হংরাঙ্গী বহির বঙ্গাভাষায়)	১৮
ওলাউঠা চিকিৎসা	৬০
প্রথম গৃহ চিকিৎসা	১১০
স্ত্রী চিকিৎসা	১১৮
অঙ্গ চিকিৎসা	১৮
শিশু চিকিৎসা	১১০

উল্লিখিত পুস্তকগুলি উল্লিখিত ঠিকানায়, এবং কর্ণওয়ালিস স্ট্রীট ২০৩ নং বেকল মেডিকেল লাইব্রেরীতে পাওয়া যায়।

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৪৫ ৪৬ ৪৭ ৪৮ ৪৯ নং কলেজ ষ্ট্রীট কলিকাতা ।

সাদারণের সুবিধায় প্রস্তুত আমরা বিলাত ও আমেরিকার প্রসিদ্ধ হোমিওপ্যাথিক ঔষধাদি ও নানাবিধ চিকিৎসা উপযোগী দ্রব্যাদি আনয়ন করাইয়া সর্বদা ডাঃ মূল্যে বিক্রয় করিয়া থাকি । প্রসিদ্ধ ডাক্তার শ্রীমুক্ত বিপিন বিহারী মৈত্রের নিকট তত্ত্বাবধানে আমাদের ঔষধাগার পরিচালিত হইয়া থাকে ।

ডাক্তার মৈত্রের প্রণীত সর্বপ্রশংসিত চিকিৎসকের নির্ণয় প্রয়োজনীয় প্রকাশিত নিম্নলিখিত পুস্তকগুলি আমাদের নিকট পাওয়া যায় ।

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বটরুপ পাল এণ্ড কোং।

এই হোমিওপ্যাথিক হল, ১২ নং বনফিল্ডস লেন,— কলিকাতা।

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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XIII]

DECEMBER 15, 1904.

[No. 12.

Homeopathy badly practised.

Great anomaly prevails nowadays among the homeopathic practitioners in this country. As people begin to value the superiority and excellence of homeopathic medication, its votaries, we say many among them, get demoralised in administering the remedies. It is a growing evil and it should be the duty of every advocate of this system of medicine to correct it.

In former years the upholders of homeopathy used to pay much attention to the study of its works, especially to the subject of *Materia Medica*. They then devoted the greater part of their time in mastering the vast field of symptomatology and the inevitable consequence was their superiority in curing cases marvelously.

By seeing these cures,- safe, sure and permanent cures, patients from all parts of the country flocked to their gates and the name of the new system of therapeutics spread like wild fire through out the length and breadth of this vast continent of India.

Now our brethren here pay very little attention to the study of real symptomatology. Some of them only study the characteristics, others explanatory lectures of some eminent homeopaths and their works but real symptomatology is neglected. This leads to unsuccessful practice. These patch works, so to speak, seldom help us in effecting a real cure especially in complicated cases of disease. In this way the name of the homeopathic healing art is going to become a name of the past.

We earnestly request our practitioners, especially the young and rising men, to devote their best energies and time to the study of pathogenetic symptoms of our Materia Medica. They would appear dry and barren at first but by continual study and steady application, the real merit of the thing will be evident and clear.

We do not write this from our imagination. It is a real fact. Many a time, we have had the occasion to meet a brother homeopath prescribing Pulsatilla where Nux Vom or Natrum mur was indicated. They do not even understand the real feature of the remedy in question. They can not grasp at the guiding symptoms of the remedy for the disease. This is deplorable.

The other day I saw a gentleman prescribing one day Calc. Phos and the next day Causticum for a case of fever where Belladonna was clearly indicated. Changing medicines every day in this way much valuable time was lost.

We do not like to multiply cases like these, but simply warn our practitioners to be careful in studying the vast field of symptomatology.

Another growing defect of our brethren consists in not administering the appropriate medicine in suitable doses. Some have the *a priori* conviction that higher potencies are only effective, while others think them useless and the lower ones to be all that can effect a cure. About the potency question, we have several times had

occasion to express our views. Both are curative in their own spheres but when the indications are clear cut higher potencies are preferable.

A most serious anomaly exists in administering the doses. Some give one dose only and others repeat the medicine too frequently. This state of things go on to such an extent that serious mischief is done to the patient. Whether the remedy is rightly selected or not they do not pay much attention. They are only eager to carry on their hobby to a bitter end. This is surely bad. In this connection we always do better to follow the Master who says many things about it in his work "Organon of Medicine". Sections 245 to 248 are quoted here for the benefit of our readers. These quotations should be carefully read and digested.

"Having thus seen what attention should, in the homœopathic treatment, be paid to the chief varieties of diseases and to the peculiar circumstances connected with them, we now pass on to what we have to say respecting the remedies and the mode of employing them, together with the diet and regimen to be observed during their use."

"Every perceptibly progressive and strikingly increasing amelioration in a transient (acute) or persistent (chronic) disease, is a condition which, as long as it lasts, completely precludes every reception of the administration of any medicine whatsoever, because all the good the medicine taken continues to effect is hastening towards its completion. Every new dose of any medicine whatsoever, even of the one last administered, that has hitherto shown itself to be salutary, would in this case disturb the work of amelioration.

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On the other hand, the slowly progressive amelioration consequent on a very minute dose, whose selection has been accurately homœopathic, when it has met with no hindrance to the duration of its action, sometimes accomplishes all the good the remedy in ques-

tion is capable from its nature of performing in a given case, in periods of forty, fifty or a hundred days. This is, however, but rarely the case; and besides, it must be a matter of great importance to the physician as well as to the patient that, were it possible, this period should be diminished to one half, one quarter, and even still less, so that a much more rapid cure might be obtained. And this may be very happily effected, as recent and oft-repeated observations have shown, under three conditions: firstly if the medicine selected with the utmost care was perfectly homœopathic, secondly if it was given in the minutest dose, so as to produce least possible excitation of the vital force, and *yet sufficient to effect the necessary change in it*, and thirdly if this minutest yet powerful dose of the best selected medicine *be repeated at suitable intervals*; which experience shall be pronounced to be the best adapted for accelerating the cure to the utmost extent, yet without the vital force, which it is sought to influence to the production of a similar medicinal disease, being able to feel itself excited and roused to adverse reactions.

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Under these conditions, the smallest doses of the best selected homœopathic medicine may be repeated with the best, often with incredible results, at intervals of fourteen, twelve, ten, eight, seven days, and, where rapidity is requisite, in chronic diseases resembling cases of acute disease, at still shorter intervals, but in acute diseases at very much shorter periods every twenty-four, twelve, eight, four hours, in the very acutest every hour, up to as often as every five minutes,—in every case in proportion to the more or less rapid course of the disease and of the action of the medicine employed as is more distinctly, in the last note.

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The dose of the same medicine may be repeated

several times according to circumstances, but only so long as or until either recovery ensues, or the same remedy ceases to do good and the rest of the disease, presenting a different groups of symptoms, demands a different homœopathic medicine.

A few words for the prevention of Plague.

1 Keep your house scrupulously clean; special attention should be paid to the flushing of drains and removal of refuse.

2 Personal cleanliness should be of the highest kind. Pay an extra amount to your washerman to clean your clothes, bed linen and other things.

3 Allow plenty of fresh air and sufficient light to come to every corner of your house, especially in the bed rooms and sitting rooms.

4 Don't allow rubbish things to accumulate in the corner of your home. These are the resting places for rats.

5 Place your beddings every day in the bright sun and warm it in the sunlight.

6 Don't take any medicines for fear of plague, because that would weaken your constitution and make you liable to diseases.

7 Fright and fear of the disease should not disturb your mind, because that will induce susceptibility to an attack of plague. Calmness and composure of mind must be kept in tact by all means.

We often find people very much frightened on hearing the report of plague cases in the neighbourhood and it is not unfrequent that they do get the disease out of fear.

• 8 Take your meals in proper time and take the best nourishing food, at the same time take easily digestible

substance. Food or drink polluted with the touch of plague cases or of those who are attending those patients must be avoided by all means. Fresh food and filtered water for drinking purposes must be enjoined. Don't allow rotten things to remain in your food store or rats to infest your storehouse.

Arsenicum Iodatum.

Iodide of Arsenic is a grand remedy. Its power to cure disease is unique and very important. It is especially useful in this country where malaria is the leading distressing ailment. We have repeatedly observed cases of malarial intermittent fever, continuing a protracted course for a length of time and maltreated by the old school physicians, assume a peculiar form of phthisis pulmonalis or some such exhausting disease. I believe these cases are very simply and successfully combated by the timely administration of the medicine.

Arsenicum Iod is also a remedy pre-eminently suitable for the cure of various phases of Scrofulosis. It may act as a preventive of developed tuberculosis.

The action of this remedy in heart troubles is very important and praiseworthy. In various forms of valvular and other organic diseases of the heart, Ars Iod plays a most important part. I will cite some cases to show the efficacy of the remedy in these various forms of ailments mentioned above.

Its fever symptoms are like those of Arsenic and Iodine combined. The fever is attended with slight chill followed by burning sensations in various parts of the body notably in palms of the hands and soles of the feet. It has also copious sweat like the night sweat of phthysical patients.

It is therefore pre-eminently a remedy for the hectic phthisis.

A Mohomedan young man, aet 24, formerly of ro-

bust health presented himself at my outdoor dispensary on the 29th September 1903 with the following symptoms.

Fever generally in the evening, temperature rising from 97. in the morning to 100.4 the highest in the evening. With the rise of temperature he complained of slight chill and burning sensation of the hands and feet and dryness of tongue, face pale and there was general anemia; cough with blood streaked expectoration more during fever. At night there was copious perspiration, mostly on the forehead and chest. Bowels were generally loose with two or three evacuations. Urine scanty and high colored, the appetite was poor and capricious.

On examining the chest I found dullness on percussion, especially on the upper part of right chest. Wheezing respiration with mucous rale was audible over the parts. He was very susceptible to cold winds which used to bring on catarrhal discharge from the nose. There was no history of tuberculosis in the family. Father still alive and mother died of malarious fever. Calcareo one dose morning and evening for a week. General health was somewhat better but no impression on his fever and cough. Medicine stopped for one week. It was the same after the lapse of that period.

Ars Iod 12 one dose every morning. This was taken about six days, when he noticed improvements in every respect. I gave this medicine for one month with occasional stoppage and the patient got rid of his disease and now he is enjoying good health and working in the office as a clerk.

Upon the heart and pulse the action of Arsenicum Iod is very peculiar. The symptoms are not very clear in our ordinary text books of Materia medica. On the respiratory organs generally we have hacking cough with dryness of nostril, asthmatic sensation, must sit up to breathe. Irregular pulse; cardiac weakness; pain with or without valvular disease.

I had a case of an elderly woman, mother of many children, who complained of in-ability to breathe properly. There was palpitation of heart, asthmatic breathing on going upstairs, and in active movements.

She was examined by several eminent physicians of this city and they all declared it to be organic disease of the heart. Valves were affected and there seemed no hope of perfect recovery.

I took charge of the case and gave many remedies without much benefit. At last I hit on Arsenic Iod as the true remedy for her. I gave her the 200th potency once a week and a complete cure was effected in six months. Since then I have rather given an extensive trial to this remedy in cases of heart disease in its various stages and without a single failure. From the scant proving of this remedy it seems to me that it requires a thorough and searching proving at the hands of homeopathic physicians in all parts of the world. It is a very good remedy in cases of phthisis in its second and even in the third stages. The following from "Gregg on consumption" by, Dr. H. C. Allen, will be interesting and valuable to our readers.—

The Iodide of arsenic has been used clinically, but empirically, in various tubercular affections, especially hæmorrhagic phthisis, and cures are reported by Dr. Niemeyer, Nonkrell, Pope, A. V. Miller, Nichol and others. But its use appears to have been chiefly based upon the wellknown indications of the two drugs of which it is composed" rather than upon any characteristics which it has yet produced on healthy. The symptoms of many of the cases reported were those chiefly pathognomonic of phthisis, instead of pathogenic of Arsenicum Iod. and the cases reported cured present distinctive symptoms of arsenic. Moreover the cases reported relieved or cured were treated with the lower potencies (first to sixth decimal), frequently repeated, and codliver oil or other remedies were given

at the same time, thus materially detracting from their clinical value. There is nothing distinctive, nothing scientific, in prescribing the Iodide of arsenic for phthisis, any more than any other of the hundreds of "cure-alls" which from time to time have been handed as specifics for this terribly fatal affection. It needs a careful proving.

Characteristic Effects—the right lung, especially upper and middle third (middle and lower third calic.)

Pronounced emaciation and great prostration of life forces (ars.)

- Face, sallow, pale, cadaverous.

Adapted to persons of dark complexion, black hair and eyes (Iod.)

Lung troubles: from living in basements; sleeping in damp, wet rooms; working in cellars or other underground places (ars., aran.)

For the acute degenerations (fibrous or caseous) following repeated attacks of bronchitis or catarrhal pneumonia, rather than hereditary phthisis.

Wheezing respiration; aggravation by lying down (ars).

Cannot sleep or breathe when lying in a horizontal position; must be bolstered up in bed (ars.)

Aggravation. In cold air; cold, stormy, changeable weather, at night; lying down, ascending a height; going upstairs; physical exertion.

Amelioration. Warmth; sitting up in bed, or lying with the head elevated.

Larynx and trachea. *Soreness in larynx.* Sore, raw sensation in larynx in damp or changeable weather (cerum.)

Hoarseness, worse from talking or singing.

Respiration. *Wheezing breathing on first lying down.*

• Dyspnoea; on exertion; when going uphill or up stairs; at night so that she had to sit up to breathe (ars.)

Breathing: feeble; weak; hurried; in occasional asthmatic attacks; too rapid even when at rest, increasing on exertion, soon becoming an audible wheezing.

Cough. Hoarse, racking cough, day and night, with profuse purulent expectoration.

Slight hacking cough with dryness and stoppage of the nostrils.

Cough: frequent, short, suppressed; often loose with muco-purulent expectoration.

Violent cough for years, with inability to bring up the sputum; the cough excites vomiting.

Relation. complimentary to *arsenicum alb.*

Expectoration. Heavy, night and morning.

Sputa: loose; stringy; muco-purulent; profuse, purulent; green, gray; offensive; nummular; of thick yellow matter; difficult to expectorate.

After moving about a short time in the morning he hawked up quantities of thick mucus mixed with clot-
ted, mucus, profuse and exhausting.

Follows sulphur well in pulmonary affections.

Mastoid disease cured by Hepar's, & Calcarea 200.

Some time ago I was called to see a gentleman who was suffering from an inflammation of the ear that was said to have taken a bad turn and threatened to affect the brain. On examination I found the middle ear greatly inflamed there. The inflammation seemed to have affected the mastoid cells also. There was high fever and the patient was in an agony of pain. The swelling of the ear was also very marked. The surgeon who was in attendance before I was called was of opinion that unless a radical operation

were performed within 24 hours, the patient's life would be in danger.

At first I gave him Mer. Sol. 30, but that seemed to have little or no effect. My next medicine was Hepar sulphur, 6. internally. The pus came out through ear and his sufferings were greatly relieved, but two days after, he had an abscess in the back of the ear that gave him great pain again. Now I gave him Hepar Sulph 30 and this opened the abscess externally and now pus began to come out from both the openings. I used to have the openings washed with boiled water and dressed with olive oil. He was completely cured in about a month's time, in the end requiring a few doses of Calc ost 200 for his general constitution.

Quinzy cured by Bellad 200.

About a month ago I was called one day in the afternoon, to see a man who was about to die from asphyxia.

In the morning he had high fever with swelling and pain in the throat. He had gone to see one of the leading Homeopathic Doctors of this place who had prescribed some medicine for him.

When I saw, I found him in an agony of pain. His face was flushed. He had high fever, the throat was enormously swollen, it was impossible for him to swallow even a sip of milk. He was unable to speak even. An amount of glairy saliva came out of the mouth. Merc sol 30 every 2 hours. In the night I had the report that the patient was no better, in fact his pains were worse and he complained of a constant throbbing in the throat.

Bellad 200. one dose at once. Reported again two hours later that the pain was better but the fever continued.

Placebo powders every three hours through the

night. Remarkably better in the morning. Placebo continued and the man was completely restored to health in three days when he called to see me and show me his boy who was suffering from an abscess in the thigh.

Formerly I used to give Bellad 3x and 30th but now I use one globule of the 200th according to Hahnemann's advise and am much more successful.

J. N. Majumdar M. D.

Cholera cured by Aconite.

A young man aged 20 was attacked with cholera about the beginning of December. When I saw him, he was in the collapsed condition, his pulse was imperceptible, he was very restless, tossing about the bed, complained of violent pains in the abdomen, his stools of the rice water consistency and being moved very frequently. He was an upcountry lad, had come down to Calcutta for shopping purposes, had suffered privations in the way and had taken irregular meals of undigestible substances at all hours. Had been given chlorodine &c. previous to my visit.

Aconite 3x every hour for four hours when we visited him again. The pulse was slightly perceptible, but he was slightly drowsy and complained of severe abdominal pains. Nux. Vom 200, one dose and no more medicine for four hours.

About 10 o'clock in the night I was informed that he was better in every way but seemed to be more drowsy. The pulse was perceptible but very weak. Placebo four powders every three hours during the night.

I visited him early in the morning, when I found a decided improvement in the patient. His pulse much better, the restlessness was also better but he still complained of the pains and felt very hungry. It was

nearly 48 hours since the disease began but as yet he passed no urine and complained of slight burning of the body. * Sulphur 200, one dose. No more medicine during the day. At 2 o'clock I was informed that he had still passed no urine, but was talking non-sense and was jumping out of bed. He was also slightly feverish. Bellad. 200, one dose

About six o'clock I was informed that he had still passed no urine and was in the same state. Moreover he was becoming very restless. I gave him a dose of Acon. 200 and told the man not to administer the powder, should he find the patient better on his return, for it has been my experience that the less medicine we administer during reaction, the better.

On his return he found that the patient had passed water but still he gave him the powder as he thought the patient was still very restless. This however made his condition worse.

Although he passed water freely and the stools became more consistent and natural, the pulse was worse and he was completely unconscious. Except groaning and moaning, he could not answer our questions and the pulse was very feeble and irregular.

Calc Ars 30 every two hours. I was informed after six hours that the pulse had improved but he was still unconscious and was getting drowsy. Moreover there was marked tympanitis as he was not moved since the morning.

Nux Mosch 30, one dose followed by Placebo.

The patient was decidedly better in the morning, and in the course of two days he was completely restored to health.

In my opinion the timely administration of Calcarea arsenica saved the patient from an imminent heart failure while Nux Moschata no doubt helped to clear the brain symptoms which was also equally essential.

J. N. Majumdar. M. D.,

Robert Ellis Dudgeon.

In the melancholy task of writing an obituary of a colleague it has been customary to give a short sketch of his life in our own words, but in the case of Dr. Dudgeon we are pleased to be able to give his autobiography from his own pen, which we assure, is much more interesting than it would have been otherwise.

In 1892 he was asked by the editor of the Hahnemannian Monthly, Dr. W. Van Baun, to send his photograph to him, and to add a sketch of his career. This request was responded to, and his letter appears in the February, 1892, number of that journal. As it is written in his characteristic, interesting, racy, and humorous, but modest style, we not only make no apology for reproducing it here, but we feel sure that our readers will thank us for doing so, and agree that it is far better than anything we could write. Coming thus from himself, it will always remain on record as a last memento of our departed friend. Here it is:—

“Dear Dr. Van Baun: You asked me for a photograph of myself for the Hahnemannian Monthly, and I cheerfully consented to send you one as soon as one of our rare glimpses of sunshine should allow me to sit to the solar artist. Now that you have got the portrait, you ask me to send you ‘a lovely sketch of my life’ to match the picture I suppose. But that is a very different matter, and a request not nearly so easy to comply with. In the course of my long career I have written many sketches of the lives of different homeopathic worthies, but have never yet attempted one of my own life. The memoirs I have written of others I have always been able to round off and give them the proper artistic finish by recording the death of their subjects, but in the case of my own life by myself you must not look for such completeness, for, unlike Moses, I am not able to tell you my exact age

at death ; still less can I boast like him that when the end came 'my eye was not dim' (alas ! I have to wear spectacles' and have a most pronounced 'annulus senilis'), nor my 'natural force abated' I might, indeed, say, like Caleb, the son of Jephunimeh, that I am as strong this day as I was when forty years old, but that would convey no information to you, as you do not know how strong I was at the age of forty. As you *will* have my life, written by myself, you must take it in its necessarily incomplete state, and with all the imperfections that must attend the work of the dim-eyed and no longer youthful writer. I would naturally feel an objection to writing my autobiography for an English periodical, because, as every one knows me here, they would be able to compare my portrait of myself with their own observations, and as no power can 'the giftie gie us to see oursels as ithers see us' they might find discrepancies betwixt, the self-drawn picture and their own conceptions of it. This objection does not apply to furnishing a self-portraiture to an American periodical, for as I am personally unknown to the great majority of its readers they will not be able to cavil at the possibly defective likeness of my sketch.

"I have, as I have said, never before attempted autobiography, so you must excuse all errors and faults inseparable from a first attempt at an unaccustomed kind of literature. The worst of it is that one has to talk such a deal about one's self. One seems to become the centre of the solar system around which all others, great and small revolve. I suppose it is natural that every one who writes his memoirs should feel himself the centre of creation—for the time being 'the hub of the universe' like the city of Boston, Mass—and probably this is why the big bugs of legendary lore in course of time come to be considered as solar myths.

"After this prolegomenon I proceed to my medical biography".

"I was born, as I have been informed, for my memory does not go so far back, in a country house in the outskirts of Edinburgh on St. Patrick's day, 1820. This, I hope, is the only event in my narrative which I must give on other than my own authority. My medical studies were carried on in the University and the extra-academic Medical School of Edinburgh. I took my surgeon's diploma in 183, and as I could not obtain my University degree before I had attained my majority, I spent the intervening time chiefly in Paris, where I pursued my studies in the Ecole de Medicine and the Hospitals, attending the lectures and the clinical practice of Velpeau, Andral Civiale, Maisonneuve, Louis, Piarry, and others. Returning to Edinburgh in 1841 I passed my final examinations and was duly invested with the magic cap which constituted me 'Medicinae Doctor' on the 1st of August of that year. After that I went to Vienna, where I passed a semester and profited by the instructions of the great medical lights of that city, among whom I may mention Skoda, Rokitansky, Hebra, Heller, and Taeger. I had for fellow students in Vienna, Drysdale, Russell, and Fisher, all well known in the Homeopathic world, and Wilde (afterwards Sir William), who did good service to Homeopathy by stating the truth respecting its success in the treatment of cholera in his book on Austria. We were all very sociable, and used to dine together at a favourite restaurant. Almost every day Drysdale, Russell, and Fisher were studying Homeopathic treatment at Fleschmann's Hospital. At that period I felt no interest in Hahnemann's system. I next spent a few months in Berlin studying eye and ear disease under Singken and Kranner, and organic chemistry under Simon. I then went for some months to Dublin, where Graves, Stokes, Corrigan, and Warsh were in full force. I renewed my friendship with my old chum Wilde, and visited his eye and ear practice diligently. Thus equip-

ped with as much medical learning as I could comfortably assimilate I set up in practice in Liverpool, where my father then resided. Drysdale, who practised there then as now, persuaded me to look into Homeopathy. In 1843, the *British journal* of Homeopathy was started by Drysdale, Russell, and Black, though there were not then a dozen Homeopathic practitioners in the United Kingdom. Drysdale gave me many articles to translate from the German for the journal, and I thus learnt a good deal about the new system, and gradually became a thorough believer. By Drysdale's advice I returned to Vienna to see the Homeopathic practice of Fleischman in the famous Gumpendorf Hospital. I now had for fellow-students Madden, Hilbers, and Macleod. Mudden and I, with our wives, lived together, and we devoted much of our time to the study of the *Materia Medica*; endeavouring to construct real pictures of disease from the *dissecta membra* of the provings with but little success as may be imagined. I made the acquaintance of most of the principal homeopathic practitioners of the Kaiserstadt, Wurmb, Walzke, Gerstel, Tlatarovich, Nehrer, and many others, whom I frequently met at the society and at their social gatherings, and from whom I learnt much. At that time Vienna was in the heyday of its homeopathic fervour, and a vast deal of invaluable work was done in the way of proving new medicines and re-proving old ones. Many useful essays were also published in the periodicals edited by the homeopathic society. A few years later the representatives of homeopathy in Vienna, apparently exhausted by their effort, subsided into a lethargy from which they have not yet been aroused. While their zeal lasted we must allow that they did splendid work.

"On my return to this country I commenced practice in London. That was in 1845. The following year I joined Drysdale and Russell in editing the *British*

Journal of Homeopathy, then commencing its fourth volume. Black had withdrawn from the editorship after the first volume. I remained editor till the cessation of the journal in 1884. Russell ceased his connection with it in 1858. Atkin joined the editorial staff in 1859, but we lost him in 1861. In 1863 Hughes became an editor, and in 1877 Hughes and I were left alone by the retirement of Drysdale. Clarke came on in 1883 to make us again a triumvirate and to assist at the obsequies of the old journal which expired the following year. During the thirty-eight years of my connection with the British journal of homeopathy there was, of course much work to be done, and it is for others to say if that work was well or ill done. I rather think there were some regrets at the final disappearance of this quarterly; at all events, the fact that we were entertained at a grand dinner where all the old editors were presented with magnificent pieces of plate by our colleagues, shows that they were not displeased with the manner in which we had performed our editorial work.

"During the long period, nearly half a century—*heu fugaces labuntur anni!*—that I have been connected with homoeopathy many incidents have occurred, many controversies have arisen, and many victories achieved, in which I have been more or less intimately engaged. It would exhaust your patience and weary your readers were I to give even a brief account of all of them; many of them, indeed, I have now forgotten, though a diligent search in the forty-two volumes of the *British Journal of Homoeopathy*—that book of the chronicles of homoeopathy—might recall them to mind. I shall only mention the most note-worthy events in which I have been personally implicated.

"A few years after Hahnemann's death, in 1843, the Central Society of German Homoeopaths, commenced to agitate for the erection of a monument to the founder of homoeopathy. Dr. Rummel, as trea-

surer of the committee appointed by the society for this purpose, appealed to British homoeopaths for subscriptions. This appeal was liberally responded to by our countrymen, and sufficient funds having been collected, the committee announced that the monument would take the form of a statue of Hahnemann to be erected in Coethen. To many of us it appeared that Coethen was a most inappropriate locality for the proposed monument, as Hahnemann's connection with that dull little town was purely accidental and transitory. Either Meissen, his birth place, or Leipzig, where he first publicly taught his doctrines and founded his school, was the proper place for his statue. I wrote in this sense to Mr. Rummell, but he replied that it was too late to make any change, as all arrangements had been completed for the erection of the statue in Coethen. The Congress of the Central Society of 1870 was held in Lugniz in Silesia. I travelled thither and spoke strongly, in my choicest High Dutch, against the determination of the committee. I was told that no change of locality was now possible; the municipality of Coethen had granted a site, and the Duke of Anhalt-Coethen had promised a liberal contribution, on the understanding that the statue should be erected in his capital. In short, I was snubbed by the committee and society, and plainly told that it was none of my business to interfere with the society's arrangements. On my return to England I brought the subject before the Homoeopathic Congress, which met that year in Cheltenham and unanimous resolution was passed by them condemning Coethen and recommending Meissen or Leipzig as the proper site for the statue. On receiving this influential remonstrance and recommendation, Dr. Rummel wrote to me that the committee had reopened the question of the site, and in deference to the wishes of their British colleagues had determined to erect the statue in Leipzig, provided the extra expense involved in the change should be met by subs-

criptions in England. I made a second appeal to my colleagues, and soon collected the required funds. This settled the matter. Leipzig was substituted, and the following year (1877) the statue was unveiled amid a large assembly of Hahnemann's disciples from various countries. England was represented on that great occasion by Drysdale, Russell, W. Hering, and myself. It is curious that no allusion was made by any of the speakers to the circumstances which had induced the committee at the eleventh hour, as it were, to save the statue from sharing its original's exile in the obscure and petty capital of an insignificant principality. *Sic vos non vobis!* Coethen was not in the end depressed of a statue of its whilom guest. Dr. A. Lutze, who set up in practice there after the great reformer's departure, erected there a statue of Hahnemann (made of stucco, I believe), at his own expense. Those desirous of seeing this work of art should visit Coethen, if they can discover exactly where it is. I have been there myself, so can certify that there is such a place. But, as Lutze's statue of Hahnemann stands in Lutze's back-garden, perhaps the adventurous visitor might miss seeing it after all.

"Whilst the representatives of homoeopathy were in full conclave in their hall, listening to a learned paper by Dr. Cloter Muller, they were alarmed by a loud explosion, quickly followed by a still louder, proceeding from beneath the room. Naturally the first idea was that this was a gunpowder plot devised by some allopathic Guy Fawkes, and intended to blow us all into the air. The actual fact was, however, not so sensational. Beneath our hall was a shop where fire works were sold, two boxes of which had successively exploded, without doing any damage beyond alarming us and breaking a few panes of glass. There was in the shop a barrel of gunpowder, which, had it caught fire would have blown us into smithereens. Had this happened my memoir would have terminated here in a

singularly effective manner amid a grand corruscation of sky-rockets, squibs, Catherine wheels and Roman candles. I should have accended to empyrean heights in good company too, for many of the most distinguished disciples of Hahnemann were present in the room, among others Stapf (of Archiv fame), Bonninghausen, Rummell, Haubold, Melicher, Schneider, Weber, Ruckert, Veit Meyer, Cloter Muller, Rentsch, Hartlaub, Herschel, Trinks, Wolf, Gross, Bolle, Hofrichter Caspar, Wahle (of Rome) Pabst (of Copenhagen), and that stately grandee of Spain, the Marquis Nunez, physicaïn to Her most Catholic Majesty, Queen Isabella, who, it is said, might still be on the throne had she been contended with her physician's medical advice and refused to listen to his political counsels. Hartmann, though in Leipzig, was confined to his arm-chair a helpless cripple, so could not take part in the ceremony. All these champions of homœopathy have now gone to join the Master in the Elysian fields, except Drysdale and myself. We stand like two solitary gnarled trunks in a forest where the grim woodman has cut down all our companions, and has paused to sharpen his axe in order to complete his work. No representative of American or French homœopathy was present on this great occasion. Your countrymen had not yet discovered how easy it is to cross the Atlantic from your side, and the French had not yet made up their minds to rush at Berlin when they might have taken Leipzig by the way.

"I had a considerable share in founding the Hahnemann Hospital and school of Homœopathy in Bloomsbury Square, with which was connected the Hahnemann Medical Society. I need not give the history of that movement. While it lasted some useful work was done. Courses of lectures were delivered to student, at the hospital by Dr. Curie on Therapeutics, by Dr. J. Epps. on *Materia Medica*, and by myself on the Theory and Practice of homœopathy (my lectures were published in one volume in 1854). Dr. Curie having died, the

managing committee of the hospital, all laymen, and most of them Curie's personal friends, laid their wise heads together, and finding that the hospital had no debt, resolved to shut it up, and this they did without giving the medical staff the slightest hint of their intention, so that we were amazed and disgusted to find one day the shutters up and bills announcing the place to be let. We were naturally indignant at this high-handed action of the committee, as the hospital was doing very good work among the poor of the neighbourhood, and many interesting cases were treated and fine cures made in it. The moral to be drawn from this affair is, if you want your hospital to be a permanent institution, see that you start it with a sufficient endowment or a good thumping debt. then your managing committee cannot close it suddenly at their own sweet will and pleasure. The hospital being gone, the lectures were stopped and the society having no local habitation, languished and died leaving the British homœopathic Society and the London homœopathic hospital masters of the field, to which we accordingly transferred our allegiance. All are now united in support of these two institutions, which have gradually eliminated from their laws most of what the dissentients objected to.

"In 1852 an agitation commenced among the governing authorities of the medical profession for an Act of Parliament to regulate the affairs of the medical school and colleges. The movement came to a head in 1854, when the famous Medical Bill was brought before Parliament. Almost all the leading bodies had at different times shown their hostility to homœopathy by passing resolutions against it, or by rejecting candidates for their diplomas who were suspected of leaning towards Homœopathy, or who avowed their intention to inquire into the hated system, it was thought desirable to scrutinize carefully the text of the Bill to see if it tananced this persecution of the members of our school. I procured a copy of the Bill, and found to my

consternation that it afforded no protection to candidates for diplomas against their arbitrary rejection by examining bodies on account of their supposed avowed preference for modes of practice differing from those of their examiners. A case which had recently occurred in Aberdeen showed to what lengths examining boards would go in their crusade against homœopathy. Mr. Harvey had already passed satisfactorily two examinations before the faculty of the Marischal College of that town. But his examiners having a suspicion that he was favourable to homœopathy, before admitting him to his final examination sent him a letter in the name of the professor of the principle and practice of medicine, Dr. Macrobin in which he demanded that Mr. Harvey should make a distinct declaration, that, as a man of honour, you have not practised and do not entertain any intention of practising the profession on other principles than those taught and sanctioned in this and other legally recognized schools of medicine. As Mr. Harvey refused to make any such absurd declaration he was not permitted to complete his examinations and obtain his degree. The Bill if passed in its actual form would allow any examining body to exact similar declarations from candidates and homœopathy would thus be practically extinguished in this country. The Bill had by this time already passed the House of commons and was to be read in a day or two in the House of Lords, when, if no amendment was proposed it would become law and seal the fate of homœopathy. No time was to be lost, so I rushed off to consult with that old tried friend of homœopathy, Lord Ebury. He fully appreciated the peril of the situation and sent for Mr. William Cowper (Lord Palmerstones step-son, afterwards Lord Mount Temple) who, as an old parliamentary hand and a friend of homœopathy, would be able to advise us in the matter. So we three conspirators sat down and concocted clause for the Bill, which

would if passed, be an ample protection to candidates for diplomas against such tyranny as that of the Aberdeen College. This clause runs as follows :

XXIII.—In case it shall appear to the General Council that an attempt has been made by any body entitled under the act to grant qualifications, to impose upon any candidate offering himself for examination an obligation to adopt or refrain from adopting the practice of any particular Theory of Medicine or Surgery as a test or condition of admitting him to examination or of granting a certificate, it shall be lawful for the said Council to represent the same to Her Majesty's most Honourable Privy Council, and the said Privy Council may thereupon issue an injunction to such body so acting, directing them to desist from such practice and in the event of their not complying therewith, their order that such body shall cease to have the power or conferring any right to be registered under this act so long as they shall continue such practice.

“Lord Ebury then hurried off to interview the Home Secretary who had charge at the Bill, and get his consent to move the adoption of this new clause in the House of Lords. I asked Lord Lyndhurst, whose family physician I was, to support the clause, if needful, in the house. He readily consented, and promised to go there for the purpose, though he was then nearly ninety years old and sadly crippled by chronic gout. The clause was quickly printed and distributed to the Peers. The opposition was encountered, and the Bill, as amended, passed the house of Lords without any particular notice. The Lord Chancellor did not even read aloud the new clause, as he said noble lords had it printed in their hands, and the whole business did not occupy five minutes. As a new clause had thus been added to the bill, it had again to pass the ordeal of the house of commons. This it did a few days later. The reasons for the introduction of the new

clause were clearly stated by Mr. Cowper, who was ably supported by some of our staunch friends in the house, particularly Lord Elcho (now Earl of Wemyss) and Mr. Brady. The allopaths were taken completely by surprise when they found that a clause for the protection of the homœopaths had been interpolated into their Bill at the eleventh hour. The great obstetrician, Sir J. Y. Simpson, whose venomous hostility to homœopathy was notorious, had apparently constituted himself the accoucheur of the Bill, and watched it anxiously through all the stages of its incubation and parturition. He sat by my side in the gallery of the House of Lords when the new clause was added there, but had not the faintest suspicion of what was going on down below him. When he read the Act, after it had passed into law, he must have been dreadfully disgusted that it deprived the licensing bodies of the power to reject candidates for degrees and diplomas on account of their homœopathic proclivities, and no doubt he returned to Edinburgh a sadder if a wiser man, to condole with his fellow—baronet, Sir Robert Christison, the ‘chucker out’ to the faculty of candidates suspected of homœopathic leanings, on the loss of his congenial occupation.

“In 1886 the majority of the medical staff of a very old institution, the Infirmary for consumption, in Margaret Street, London, began to feel uneasy because two of their number had become converts to homœopathy, and treated their patients in the Infirmary according to that method. This introduction of the accursed thing into an institution which had heretofore enjoyed an unsullied reputation for orthodoxy was intolerable to their colleagues on the staff of the Infirmary, who made no concealment of their resolution to get rid of the heretics. I was requested by the intended victims to come and help them. As a preliminary I qualified myself for the post of governor of the infirmary by subscribing to its funds. Several

futile attempts were made to induce the two homœopaths to resign. They decline to do so. It was then resolved that they should be expelled. This was a serious step, and had to be done at a general meeting, the governors summoned *ad hoc*. Accordingly, at the beginning of 1887 the eventful meeting was convened, previous to the date of meeting the allopathic majority circulated a private letter among its governors, declaring that if the obnoxious homœopaths were not dismissed they would all resign. They hoped by this threat to intimidate the governors, who might hesitate about depriving their institution of the services of almost all its medical officers. But, the best laid schemes o'mice and men gang aft agley, and the governors no doubt felt that this threat was what is called in pugilistic language hitting below the belt. The opponents of homœopathy moved that it having been proved that Drs. Jagielski and Marsh have treated patients of Infirmary homœopathically these gentlemen be requested to resign their positions on the staff of the Infirmary; I proposed, as an amendment, that any attempt to limit the liberty of opinion or practice of the medical officers is not sanctioned by the laws of the Infirmary, is prejudicial to the interests of the Infirmary, and is opposed to the spirit of the medical Act of 1858. After a long and animated discussion, my amendment was carried by a majority of the votes of the governors, and the allopathic majority of medical officers seven in number—tendered their resignation on the staff of the Infirmary. This did no injury to the Infirmary, as their places were soon filled by the election of an equal number of liberal minded physicians and surgeons, some homœopathic and some allopathic.

“Proceedings that resulted from the victory of homœopathy led to the famous discussion on the ‘*Odium medicum*’ carried on in *The Times* newspaper for about six weeks. It was commenced by Lord

Grimthorpe, who occupied the chair at the meeting of the governors of the Infirmary for consumption many well known members of both schools took part in this controversy, to which I contributed my share. It was generally agreed, even by the allopathic periodicals that the homoeopaths scored most points in the logomachic match. We were so satisfied that all throughout we had the best of the argument that we published and widely distributed the whole of the letters in pamphlet form.

"For many years past the medical men of Hahnemann school had ceased to publish any popular work on homoeopathy explaining its doctrines and practice, and it was noticed by many of us that few of the lay public knew what homoeopathy was, and were very prone to class it amongst the unscientific quackeries which have always abounded in medicine. We met together to consider how this ignorance could be removed, and the result of our deliberations was that we resolved to form ourselves into a society composed of medical and nonmedical adherents of homoeopathy, for the purpose of diffusing a correct knowledge of homoeopathy among the public by means of popular writings and lectures. We called our association the homoeopathic League. We appointed a committee to transact its business, and since 1887 we have published thirty six popular tracts, forming three volumes. We have reasons to believe that these tracts have been very useful in spreading a correct knowledge of homoeopathy among the people. Allied associations have been established in France and Spain, and many of the tracts have been translated into Spanish, French and Italian. Some, I observe, have been thought worthy of reproduction in American periodicals. The tracts have also been extensively circulated in India and Australia. I took an active part in the league, which has thrown upon me a good deal of not uncongenial work.

"I think I have now given you an account of the

principle events of my homoeopathic history, but perhaps you may not object to hear of some of the other matters more or less connected with medical science which have occupied my attention during my professional career.

"In working with the microscope I thought it might be of advantage to be able to examine a considerable quantity of fluid at once. In order to do this I encased the object-piece of the microscope in a metal tube closed at the further end by a disc of thin glass. This glass plate must, of course, be well within the focal distance of the object glass. In this way an ounce or more of urine contained in a glass cell may be examined at a time, all that is required is to insert the object piece encased in its water-tight tube into the fluid and work it until the proper focus is obtained. The power I chiefly employ for examination of urine is a one-fourth inch objective, and the glass plate at the end of the tube comes to within one-eighth of an inch of the objective. This apparatus can also be used for the examination of the minute organisms contained in other fluids. I described this arrangement of the microscope in the eleventh volume of the quarterly journal of microscopic science.

"In 1870-1, while making some investigations into the dioptrics of vision, in order to ascertain the precise refractive value of the anterior lens of the eye formed by the aqueous humour bounded by the transparent convex cornea, I extinguished this lens by immersing my eye in water. I then found that perfect vision was restored to the immersed eye by a glass lens which had in air a focal distance of three-eighths of an inch. This lens, in the more refractive medium of water, I found to possess a focal distance of one and one-half inches, consequently this was the focal distance or refractive value of the anterior lens of the eye. It occurred to me that for subsequent purposes it would be better to construct my compensating lens

of air. But as the refractive power of air is much less than that of water, my air lens would need to be concave in place of convex. I found that two watch glasses having a radius of curvature of one inch placed back to back, that is, with their concave surfaces looking outwards, formed, when immersed in water, a lens whose focal distance is one and one-half inches. This, when placed before the immersed eye, restored perfect vision. On this principle I constructed a pair of spectacles which, while restoring perfect vision under water, does not interfere with perfect vision in the air. In order to make my air-lens perfect, in place of using watch-glasses, I had the enclosing glasses ground accurately of the exact radius of curvature required. I find these spectacles of great use when diving in clear fresh or salt water, as they enable me to see distinctly all around me. Sir John Herschel, to whom I communicated my invention, wrote me a letter in which he complimented me on its ingenuity. My investigations into the dioptrics of vision led me to a new explanation of the mechanism of accommodation, differing entirely from that generally received. I do not think my explanation has been adopted by any prominent authorities on the physiology of the eye except Dr. Jacob, of Dublin, the celebrated oculist, who first described the structure in the eye that goes by the name of Jacob's membrane. My desire to gain publicity for my view of the mechanism of accommodation led to an animated conflict with the committee of the International Ophthalmic Congress of 1872, in which I gained a signal victory over the anti-homoeopathic bigots on the committee who sought to exclude me from the Congress, and prevent me reading a paper on the subject, on the ground that I practised homoeopathy. I read my paper, and it is published in the transactions of the congress. A full account of my views on the mechanism of accommodation and a description of my diving spectacles

will be found in a little work I published entitled *the human eye* ; its optical construction.

"I have always been very fond of swimming, and have advocated it as a necessary part of the education of all boys and girls. All who dwell on a little island like ours should know how to swim, for if they happened to tumble off and were unable to swim, it might be awkward for them. In 1873 I made a personal inspection of all the surviving tanks of London, and practically tested them all, except two or three, which were so repulsively dirty I could not master courage to venture into them. I published the results of my observations, first in the British Journal of Homœopathy, and afterwards in a pamphlet. Since then many more swimming baths have been established in the metropolis, some of which are superior to many I have described in my article.

"In 1879 I got a Poud's sphygmograph, which, though in some respects an improvement on Marey's was yet far from satisfactory. I believed I could contrive a better instrument so I set to work to try. A young watch-maker's apprentice from the Black Forest about this time came to London to seek for work. I asked him if he could make a sphygmograph under my direction. He said he thought he could, and after several failures we at last succeeded, and the pocket sphygmograph which bears my name was the result. At first the allopathic authorities, disliking its origin, and yet not liking altogether to condemn what might ultimately prove to be first favourite, hedged cautiously about it favoring it with final praise, such as (a pretty toy) but not to be compared as to accuracy with the instrument of Marey ; and so forth. But now it is generally acknowledged to be the best, and most of the recent writers of text books on physiology and pathology describe and figure my sphygmography and no other, and seem quite satisfied that the pulse tracings it makes are reliable and accurate.

"My contributions to homeopathic literature are too numerous to mention, but perhaps my chief claim to remembrance by the homeopathic world is as the translator of all Hahneman's homeopathic works (except the *Chronic diseases*) and of many of his pre-homeopathic works. I have been twice chosen President of the British Homeopathic Congress, and the crowning however of my life was my selection as President of the International Homeopathic Congress which met this year at Atlantic City. I much regretted my inability to put in a personal appearance on that great occasion, but I highly sensible of the honour conferred on me by the choice of my American colleagues. I have been chosen to deliver the Hahnemann Oration at our hospital here.

"I have been engaged in almost every controversy on homeopathy in the medical and lay periodicals. I believe I am the first and only avowed partisan of homeopathy who has defended the method of Hahnemann in the London Medical Society.* The occasion was when Dr. Routh read his paper on 'The fallacies of Homeopathy,' which he afterwards published in pamphlet form. I was present as a visitor, and after the paper had been read I asked permission to reply. Some opposition was raised to my request, but the president having put it to the vote, the majority decided that I should be heard and I was listened to with attention, and some of my observations were even slightly applauded. I also took part in a friendly discussion on homeopathy in an allopathic medical society called, if I remember right, the Guild at St. Luke.

"I have also taken part in discussions in various periodicals on Pasteurism. Kochism, vivisection, and

* (Dr. Dudgeon was mistaken here. It was at the London Medical Society that the first discussion on Homeopathy took place, in a paper by Mr. Kindom, for the account of this see, M. H. R. vol. xxi p. 504, October 1877.)

alcohol-drinking, and I have addressed public meetings on the two latter kindred delusions.

"I think the above is about all I can tell you respecting my medical career. I fear your readers will be shocked at the length of my egotistical narration, but please take the blame to yourself. *Tu Lasvoulus, Georges Dardin!* You begged me to write my autobiography, forgetting the proverbial garuliiy of old age, so you must abide the natural consequences. An excuse must be made for me, viz, that this is my first attempt to write the history of my life. Should Providence endow me with as many lives as a cat (nine I believe is the recognised number), and spare me to write a narrative of each, by the time I reached the sixth or eighth I may have acquired the art of writing autobiography with that brevity which is said to be the soul of wit. Naturally the events of our own life are more interesting to ourselves than to others. Even things which at the time were disagreeable and annoying are often not unpleasant in reminiscences in accordance with the philosophic reflection of pious Acrneas: *Hoec olim meminisse juvabit*. They say that wicked French countesses turn devout in their old age for the pleasure it gives them to relate all the pleasant sins of their *beaux jours* in the ear of an indulgent father confessor. So we old men, when we get the chance, love to confide the events of our past life to our patient and muchenduring father confessor 'the courteous reader.'

"At length, however (at what enormous length your readers will exclaim), I have said all I wish to say respecting my medical career. I will only add, that though in the seventies, I am still hale and hearty I do my professional work without fatigue.

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